THE CATHOLIC UNIVERSITY OF AMERICA

A Descriptive Study of the Effects of Exposure to Violence in an Inner City Community on Aspects of Adolescent Identity Development During This Critical Phase

A DISSERTATION

Submitted to the Faculty of the

School of Nursing

Of the Catholic University of America

In Partial Fulfillment of the Requirements

For the Degree

Doctor of Nursing Science

©

Copyright All Rights Reserved

Deborah Burdett Schiavone

Washington, D.C.

2000

DISSERTATION ABSTRACT

A Descriptive Study of the Effects of Exposure to Violence in an Inner City Community on Aspects of Adolescent Identity Development During This Critical Phase

Deborah Schiavone, RN, CS

ABSTRACT

Inner city youths are at particular risk for violence. The social effects of violence on our adolescents have profound implications on their development, now and as they mature into adulthood. The purpose of this study was to describe the effects of exposure to violence in an inner city community on aspects of adolescent identity development during this critical phase. The collection of data was pursued to answer specific questions: (a) what are adolescents' experiences with exposure to violence in their community as revealed in their self narratives, (b) what interpretations and meanings do adolescents ascribe to their exposure to violence in the community, (c) how does exposure to violence affect adolescents' self image, view of a just and benevolent world, value of human life, ideology of right and wrong, and thoughts of their future? The conceptual orientation for this study was psychobiography, or life history. Personal narratives are significant resources for understanding individual persons. The ascribed meanings for life experiences

influence how persons organize their self identity. The methodology for this study was a qualitative exploratory design that used a non-probability sample. Young adults between the ages of 18 and 21 were recruited from inner city community programs. Data were collected from a demographic sheet and written transcripts of audio-taped stories. The chronological arrangement of events of exposure on an Age Line helped participants organize their stories. Data were analyzed according to the methodologies of narrative and constant comparative analysis. Thirteen participants, 11 Blacks, 1 Hispanic, 1 Mixed race, completed the study by telling their personal stories describing their exposure to community violence. The numbers of exposures to community violence ranged from 2 to 6 per person. The young persons in this study used coping strategies of distrust, detachment, distraction, and minimization. A major theme was one of oppression. Further research is needed to expand the knowledge of the impact of violence on adolescent identity development.

This dissertation by Deborah L. Schiavone fulfills the dissertation requirement for the doctoral degree in Nursing approved by Sr. Mary Jean Flaherty, Ph.D., F.A.A.N., as Director, and by Janice Hallal, D.N.Sc., and Camille Grosso, Ph.D. as Readers

Sr. Mary Jean Blaherty, Ph.D., F.A.A.N, DirectorJanice Hallal, D.N.Sc., Reader

Camille Grosso, Ph.D., Reader

AKNOWLEDGEMENTS

I express my heartfelt gratitude for those who gave their time, energy, encouragement, and support during the course of my doctoral study. I thank Sr. Mary Jean Flaherty, a true teacher: respectful, nurturing, astute, and wise. She recognized my potential and dedicated her mentoring to my accomplishment. Dr. Janice Hallal was exceptionally available and responsive to my wide range of needs. Her calmness and smiles helped me immeasurably. Dr. Camille Grosso was a scholarly editor, and tirelessly gave encouragement and compassion.

The courageous young persons that participated in this study trusted me with their life stories. They will forever hold a special place in my heart. I thank Ms. Dobbins for making special efforts to help me get a sample.

I thank and love Andrew, Jr., Andrew, III, and Sam for embracing squalor while wife and mom could be a scholar. They gave of their hearts for me. Chad and Kelli were always ready to uplift my spirits and help in any way. Dr. Annette Debisette, a very special friend, was always there for me, and knew when to call. Sam, Bess, and Betty offered enthusiastic support and love. Special thanks to Dr. Elizabeth McFarlane, Dr. Elizabeth O'Brien, Gail Hartnett, Catherine Gittings, Patcharaporn Kerdmongkol, and classmates.

TABLE OF CONTENTS

CHAPTER I Presentation of Research Study	1
Background	2
Purpose	5
Research Questions	5
Conceptual Orientation	6
Definitions	11
Violence	11
Story	11
Adolescents	11
Community	12
Design of the Study	12
Limitations of the Study	13
Assumptions	13
Significance of the Study	14
CHAPTER II Review of the Literature	17
Environmental Perspectives	17
Community Violence	22
Exposure to Violence	27
Adolescence	29
Concept	29
Development	31
Narrative	35
Narrative, Socialization, and Development .	38
Narrative and Identity	44
Narrative Research and Nursing	48
Conclusion	55
CHAPTER III Methodology	57
Design	57
Theoretical Considerations	57
Sample	60
Setting	62
Protection of Human Subjects	63
Instrumentation	64
Demographic Sheet	64
Age line	64
Procedure	68
Data Collection	68
Data Management	69
Narrative	70
Research and Rigor	71

Analysis of Data	73
CHAPTER IV Presentation and Analysis of Findings	78
Introduction	78
Description of Sample	79
Age	79
Gender	80
Ethnic Background	80
Family Size and Members Living	
In Household	81
Types of Exposure to Violence	83
Location of Exposure	85
Age Line	86
Narrative Analysis	90
Distinguishing Self from Others	95
Relationships	106
Social Patterns	117
Fighting and Robbery	117
Drugs	120
Shooting	121
School	125
Community	127
Conflict	131
Psychological Aspects	134
Constant Comparative Method Analysis	136
Meanings for the Acts of Violence	137
The Effects of Exposure to Violence	139
How Exposure to Violence Affected	
The Self	143
Culture of Violence	148
Relationships	150
View of Right and Wrong	152
View of the Future	153
Conclusion	155
CHAPTER V Summary and Discussion of the Findings,	
Conclusions, and Recommendations	159
Introduction	159
Summary of findings	159
Discussion	168
Use of Psychobiography and Narrative	
Methodology	178
Psychobiography	178
Narrative Methodology	179
Advantages	179

		Disadvantages	182
Use	of Cor	nstant Comparative Analysis	183
Limi	itation	ns	184
-		ons and Recommendations for Nursing	
Prac	ctice a	and Research	185
	Nursi	ing Practice	185
		ing Research	188
Conc	clusior	1	192
Appendix	7	Contact Sheet	193
Appendix	A	Contact Sheet	1)
Appendix	В	Consent to Participate in Research	
		Study	194
Appendix	С	Demographic Sheet	196
Appendix	D	Age Line	197
пррепатк	D	Age Bine	
Appendix	Ε	Code Themes	198
Appendix	F	Contact Summary Sheet	199
Doforono			200

LIST OF TABLES

1.	Age of participants	79
2.	Gender	80
3.	Ethnic background	81
4.	Family size	82
5.	Relationships of persons living In the household	83
6.	Types of exposure to violence	84
7.	Number of times exposure	
	Occurred per individual	85
8.	Locations of exposure	86

LIST OF FIGURES

1.	Age line	87
2.	Meanings for the Acts of Violence	138
3.	Meanings of Exposure To Violence Categories	140
4.	Self Identity Categories	144
5.	Culture of Violence Categories	149
6.	Relationships categories	151
7.	View of Right and Wrong Categories	152
8.	View of the Future Categories	154
9.	Summary of Categories	156
10.	Themes	157
11.	Diagram of the Interaction Of Predominate Themes	158

CHAPTER I

Presentation of Research Study

Background

The United States has become the most violent country in the industrialized world (Richters, 1993; Rosenberg, 1995). American adolescents are unique among other countries in their exposure to violence (Takanishi, 1993). The death rate for children under 15 years of age for 26 countries in 1994 was 2872. The death rate due to homicide for these same countries was 1995. The United States accounted for 73% of these deaths, or 1464, making the U.S. homicide rate five times higher than the other 25 countries combined (Centers for Disease Control, 1997). Homicide accounts for 20% of deaths of youth ages 5 to 24 (CDC, 1996). It is the second leading cause of death for teenagers and young adults, and is the leading cause of death for African-American youth ages 15 to 24 (CDC, 1995). Homicide rates for African-American youth, ages 15 to 24, are 8 times greater than White counterparts. Mortality reports for youth in the District of Columbia indicated 61% of all deaths in 1995 were due to homicide (CDC, 1997).

The largest increases in homicide rates have been in the core metropolitan areas. Homicide rates for adolescents15 to 19 years of age were almost 7 times higher in metropolitan areas, and for African American males, the

rate was 14 times higher (Fingerhut, Ingram, & Feldman, 1998). White males have a 1:205 chance of dying from violence, compared to a 1:27 chance of dying from violence for Black males (Glittenberg, 1995). These data are consistent with other reports indicating minority and disadvantaged communities differ on many health status indicators.

Poverty and socioeconomic factors have often been identified as a crucial variable for problems in our inner cities. It is poverty, not ethnicity or race, that is most clearly associated with homicide and violence (Glittenberg, 1995; Public Health Service, 1990). Thomas (1995) indicated that inner city neighborhoods, particularly the impoverished, are isolated from mainstream life of America by their violent surroundings. When compared to the decrease in national death rates, the increase in the death rate of adolescents suggests sociocultural determinants (Nichterm, 1982).

Inner city youth are at particular risk for violence.

Sells and Blum (1996) reviewed reported indicators of adolescent health to find that the discrepancy for those living in poverty was stark for minority populations: 17% of White children lived in poverty, while 47% of African-Americans, and 40% of Hispanic children lived in poverty in 1992.

In 1989 the District of Columbia spent an estimated \$20.4 million in hospital costs for violent injury with 55% caused by firearms (Thomas, 1995). The cost of hospitalization for an individual victim of violence averaged \$7,319.00 with a range up to \$261,000. Thomas (1995) reported 224 children under 18 had been killed in the District of Columbia during the five years previous to publication of data. Additionally, some of these children were merely bystanders (Thomas, 1995).

The number of adolescent victims of crime has also risen. The increases have been demonstrable, and as a result, adolescents report fear and worry about crime (Sells & Blum, 1996). A study of over 200,000 American high school students indicated that 8% of the urban school youth reported missing at least one day of classes because of being afraid to go to school (Wheeler & Baron, 1994). Additionally, in a national survey of 753 male students in 10 inner city public high schools, Sheley and Wright (1992) found that 30% of the student group owned a gun at least once in their lives. The researchers found that the main reason for carrying a gun was self-protection and self-preservation.

Similarly, Schubiner, Scott, and Tzelepis (1993) surveyed 246 inner city youths, predominantly Black youths ages 15 to 23, for exposure to and participation in

violence. Forty-four percent stated that they could have access to a gun within 24 hours, 42% had seen someone shot or knifed, and 22% had seen someone killed. These startling data have triggered a scientific interest in violence and youth.

The root causes of violence have become a particular interest to researchers. As the number of adolescent victims rises, so does the number of adolescents exposed to violence. The social effects of violence on our adolescents have profound implications on their development now and as they mature into adulthood. Holton (1995) proposed that the impact of violence witnessed by children is less apparent, invisible, compared to the visible impact of the victims. The psychological and emotional demands required for comprehension and adjustment of witnessed violence are tremendous (Holton, 1995). Poverty further diminishes the ability to sustain psychological fitness and ability to function (Holton, 1995).

Richters (1993) stated that there is a clear and urgent need for intensive research to understand the full scope of community violence and its implications for children and families. What effects exposure to violence has on an adolescent's self image, values, and beliefs are not known. How might this exposure to violence affect moral sense? How does exposure to violence influence coping behaviors?

How does community violence affect the process of normal adolescent development? As those areas of violence are researched, measures of how our children are adapting must be included. Healthy development has long been associated with security, trust, safety, and freedom to explore and master the environment (Erikson, 1963). Children living in a violent culture experience changes and alterations in everyday life events (Kasdin, 1993; Thomas, 1995). Researchers in the area of violence have indicated that urban youths have often been ignored in research in the aspects of adolescent development (Panel on High Risk Youth, 1993; Rosenberg, 1995). Assessments of adolescents that do not address daily psychosocial components, and ignore racial or ethnic considerations can result in the application of inappropriate and ineffective interventions.

Purpose

The purpose of this study was to describe the effects of exposure to violence in an inner city community on aspects of adolescents'identity development during this critical phase.

Research Questions

During the phase of adolescence the individual is challenged with organizing a sense of self in relation to specific developmental tasks. This study was conducted to describe how this organization and task completion are

influenced by exposure to violence in the community. The collection of data was pursued to answer specific questions, as follows:

- 1. What are adolescents' experiences with exposure to violence in their community as revealed in their selfnarratives?
- 2. What interpretations and meanings do adolescents ascribe to their exposure to violence in the community?
- 3. How does exposure to violence affect adolescents' self image, view of a just and benevolent world, value of human life, ideology of right and wrong, and thoughts of their future?

Conceptual Orientation

The study of personality development has involved various disciplines. There are disciplines whose orientation holds that self-identity is developed through the stories of self. Psychobiography, or life history has long been used as a method to discover and understand the human experience (Rosenwald & Ochberg, 1992).

Most scholars in the area of personality inquiry are familiar with Freud's use of psychobiography. Freud demonstrated that life experiences have a dramatic influence on personality. Historicism is central to the telling of one's self (Rosenwald & Ochberg, 1992). Freud's case studies of "Wolf Man", "Rat Man", and "Anna O" are examples of

interpretation of outcomes by clarifying meaning of past events. As an understanding of self is developed, such growth is dependent on an accounting of our past interactions (Rosenwald & Ochberg, 1992).

Henry Murray (1938) was interested in understanding personality of the individual. Murray stated that it is the whole individual that is of interest rather than aggregates of personality, indicating that study of the individual will enhance understanding of personality. Murray (1938) believed that the "history of the organism is the organism " (p. 38). Murray's postulates support the pursuit of life histories as follows:

What an organism knows or believes is in some measure, a product of formerly encountered situation. Thus much of what was inside the organism was once outside. An individual life can be most clearly formulated as a succession of related episodes (p.39).

A theme may be defined as the dynamic structure of a single episode... Single episodes may relatedly succeed each other to constitute a complex episode. The biography of a man may be portrayed abstractly as a historic route of schemas (p. 43).

The environment changes. Success and failure produce their effects. There is learning and maturation. There are orderly rhythms and progressions

which are functions of seasons, of age, of sex, of established cultural practices, and so forth. These phenomena make biography imperative (p.43).

Since the central idea of personality psychology requires understanding of individual persons and lives, life histories are significant resources (Runyan, 1990). This process offers a narrative accounting of interpretations and explanations while organizing substantial data that draw on theoretical and broad knowledge (Runyan, 1988). Impetus for new biographical study, new sources of evidence and advances in theoretical knowledge are evidenced by the range of interested disciplines and an increase in published qualitative and quantitative analysis (Runyan, 1988).

According to Runyan (1988), the four basic tasks of personality psychology are to "develop general theories of personality; analyze individual and group differences; understand individual persons; study specific processes and classes of behavior." (p. 321). The main pursuit is the understanding of individual lives.

When a person relates their psychobiography, self story, they are expressing how aspects of living, such as inner selves, others, gender, class, events, starting and ending points, turning points, and coherence are dealt with. Stories reveal suffering and dreams that are experienced through life's gains and losses. The telling of a story

reveals the resilience, endurance, the human dignity that triumphs over the threatening structural forces that are ubiquitous in society (Denzin, 1989). Stories provide a means for the narrator to tell how their lives are patterned through meaning and interpretation. Narratives are natural cognitive and linguistic forms through which individuals attempt to order, organize, and express meaning. "Implicit claim for a valued social identity is embedded in a story" (Mishler, 1986, p. 115).

Narrative thinking is the primary way of making sense of human experiences; consequently, storing information about one's life is a process that is revealed through narrative accounts (Mattingly, 1991). Narrative thought captures human action, intentions, beliefs, and occurrences. The narrative accounts allow people to make sense of their experiences and to find meaning (Baumeister & Newman, 1994). The study of narratives elucidates the social influence that shapes self understanding (Gergen & Gergen, 1983).

According to Bruner (1990), human lives and minds reflect culture and history, as well as biological and physical resources. Self identities and the meanings that are ascribed to one's life are constructed on culturally shaped notions. As a result the ascribed meanings and cultural cohesion influence how persons organize their self and worldviews. A person's beliefs and premises enter into

narratives, as well as meanings forged by interpreting deviations from cultural norms into established terms of belief (Bruner, 1990).

The story is an accounting of reasons in which encountered exceptions to the ordinary are given meaning. Self-stories contain both cultural convention and deviation that are explained in terms of individual intentions; consequently, the protagonist interprets things and their meanings into their own narrative (Bruner, 1990).

According to Bruner (1994), it is not plausible to observe a person throughout their life span and developmental stages, but it is possible to do retrospective inquiry through the self-narrative. Not only does the narrative consist of sequences of events, actions, thoughts, and feelings, it is an "account of what one thinks one did, in what settings, in what ways, for what felt reasons" (Bruner, 1994, p.119). The self-view evolves with history and turning points that are linked to outside events, inside happenings, or changes in beliefs or emotive expression. These events are richly described in the narrative (Bruner, 1994).

Definitions

Violence

Theoretical: "Violence is an action that inhibits growth, negates inherent potential, limits productive living, and causes death" (Bulhan, 1985, p.135).

Story

Theoretical: The story resolves identity formation through a narrative that makes sense and provides unity and purpose within a sociohistorical matrix that embodies a much larger story. A person's world establishes the parameters for life stories. The life story is a joint product of person and environment (McAdams, 1988).

Adolescents

Theoretical: Adolescents are young persons in a period of time that is defined as: "A transitional developmental period between childhood and adulthood that is characterized by more biological, psychological, and social changes than any other stage except infancy. The biological, cognitive, and social role changes are viewed as primary changes because they are universal across culture and occur prior to the secondary changes of adolescence. The secondary changes refer to identity, achievement, sexuality, intimacy, autonomy, and attachment (Johnson, 1997, p.412).

Community

Theoretical: Community is defined as the environmental surroundings in which an adolescent develops and lives.

Adolescents are dependent on living conditions of their parents, and are vulnerable to the impact of these conditions which are beyond their control (Kasdin, 1993).

Design of the Study

This study used an inductive qualitative design to discover the contextual meanings of exposure to violence that were internalized during the developmental span of adolescence. The data emerged from the narrated selfstories as told through retrospection by adolescents. The adolescent participants were recruited from the community setting in which they reside. A nonrandomized sample was obtained with the assistance of key informants in an urban community. The key informants were recruited from youth organizations. Data were collected from the individual life stories as told by the adolescents. The stories were tape recorded within the parameters of informed consent and then transcribed into written word to facilitate data analysis by the researcher. The sample size was determined as themes emerge from the data until no new theme or concepts are observed; however, to assure a manageable range of data, the sample was limited to a maximum of 20 participants. The

analysis was accomplished by techniques demonstrated in narrative analysis and grounded theory methods.

Limitations of the Study

This study was limited by:

- 1. A sample taken from one inner city population.
- 2. A one time data collection point that is intended to represent a lifetime of experiences.
 - 3. The non-randomized, purposive sample collection.

<u>Assumptions</u>

It was assumed that:

- 1. Participants in this study have had similar exposure to violence in their community, and as portrayed in various media; such as, television, movies, publications, and news accounts.
 - 2. Participants have similar skills in story telling.
- 3. Observation of a violent act will have an effect that will require meaning making by the adolescent observer.
- 4. Self stories reflect valid biological, psychological, sociological, and cultural variables that influence self development.

Significance of the Study

Nurses are accountable for aspects of health care that include growth and development, emotional status, coping, and cultural, religious, and socioeconomic background. The nurse must be able to determine deviation from normal and

the degree of deviation. Nurses must also be able to understand clients' capabilities and limitations in all settings.

It is essential that nurses have sufficient and broad knowledge about the physical and psychosocial needs of children and adolescents. A research investigation, using the Delphi technique to survey pediatric nurse experts, revealed that their number one concern for threats to health was the increase in violence (Broome, Woodring, O'Connor-Von, 1996). This group recommended that research evaluates the psychological effects of trauma on children, and move into less controlled settings in the community.

Although the literature provides nurses with knowledge regarding risk behaviors, symptoms of traumatic stress, and rates of exposure to violence, what is lacking is knowledge of how normal developmental process is affected by community violence. Additionally, risk factors associated with violence have received more research interest than health and community factors that promote resilience in these youths (Kasdin, 1993).

While it is evident that some individuals have a shift in values and subsequently devalue human life (Emery, 1993), what influences a shift in values by adolescents has not been empirically studied. The unique advantage of qualitative study is that this methodology can reveal the

meanings that adolescents ascribe to everyday life (Panel on High Risk Youth, 1993). The self- narratives of adolescents will reveal what meanings have evolved in response to exposure to violence, and will also reflect the contextual aspects of their everyday life.

Prothrow-Stith (1995) recommended that effective intervention programs must be developmentally and culturally appropriate for adolescents. Treatment needs to reflect an understanding of adolescent development. Since violence as a cultural more has become ubiquitous, nurses need to understand its meanings and characteristics within the context of health and social systems in order to treat human responses (Dreher, 1996). The movement of health care from the hospital to the community places nurses in a position to understand clients' health from their cultural and social perspective; therefore, nurses have the responsibility to respond to the needs of adolescents living in a community with high incidences for exposure to violence. Knowledge that mothers teach their children to lie prone while watching television, and to sleep under windowsills, in order to avoid stray bullets, only highlights the magnitude of the problem (Osofsky, 1995).

Narratives offer descriptions of experiences that give not only an accounting of the scenes they describe, but also reveal the processes, products, and consequences (Rosenwald

& Ochberg, 1992). Data from narratives of adolescents exposed to community violence could provide professional nurses with a unique ability to identify the impacts of violence among adolescents and to plan appropriate interventions. This is especially significant since nurses are the largest group of health care professionals caring for children and their families (Broome, Woodring, O'Connor-Von, 1996).

In conclusion, research in the extant literature and current thinking has focused on the causation of violence, but has failed to identify what long term impact exposure to violence has on the human, moral, and social being that lives and develops in a violent environment (Richters, 1993; Osofsky, 1995). Additionally, the literature has not been able to identify independent and interactive influences of class, race, gender, and ethnicity on adolescent development (Panel on High Risk Youth, 1993). The narratives as told by adolescents have the potential to contribute to the body of knowledge that seeks to understand the effects of those variables on the adolescents' meanings of self, values, behaviors, socialization, intimacy, and health.

CHAPTER II

Review of the Literature

The relevant research studies investigating the influences of exposure to community violence on aspects of adolescent development are reviewed in this chapter.

Literature that expands the use of narratives to understand identity is emphasized.

Research investigating community violence, exposure to violence, and research specific to adolescents are included to further support the basic undertaking of this study. In conclusion, data related to adolescents' self image, values of human life, and moral development are presented to further support the potential for long term effects from exposure to community violence.

Environmental Perspectives

"Community is considered either a single entity or a collection of unique individuals" (Drevdahl, 1995, p.14).

The community provides an environment that fosters relationships that provide for experiences of diversity and unity (Drevdahl, 1995). The characteristics of a community, particularly social and political factors influence the health of its members; however, these aspects are undervalued and consequently, understudied (Altman, 1995).

Jones and Meleis (1993) reviewed nursing descriptions of health in the literature and found that health was

defined by concepts, as follows: meeting needs, adaptation, stability, optimum wellness, and a process of growth and becoming. Furthermore, the concept of health requires social resources that are accessible and attainable. The holistic care of individuals is related to internal and external resources that transact with the environment (Jones & Meleis, 1993). The authors named the ability for an individual to avail themselves to these conditions as "empowerment" (p. 12).

Altman (1995) proposed that empowerment of a community contributed to a desirable quality of life. According to Altman (1995), empowerment involves three levels: psychological, organizational, and community. Consistent with those factors Jones and Meleis (1993) identified as health, Altman (1995) added control, competence, and motivation in the psychological level, incicating these factors as supporting choice and problem solving. The organizational level includes opportunities for interactions of individuals to influence and exert control. The community level enables individuals or groups of members to influence access to resources.

Poverty acts as a constraint to individual or group interactions within the social structure, limiting choice and access to resources (Holton, 1995). According to the Department of Health and Human Services (1991),

disadvantaged communities fall below other communities in many health statistics. Minority populations are of particular concern. The rate of poverty in 1991 for African Americans was 32%, compared to 14.2% for all Americans. Children have higher rates of poverty as indicated in 1993 health statistics. The authors identified that socioeconomic factors account for the majority of the discrepancy between group differences and health outcomes (Flack, Amaro, Jenkins, Kunitz, Levy, Mixon, & Yu, 1995).

Investigations of minority health indicated environmental factors to be significant variables in health outcomes; among these were economics, residential, familial, educational, and cultural factors (Johnson, Anderson, Bastida, Kramer, Williams, & Wong, 1995). The panel found that access to health care for Hispanics is limited, and two in five Hispanic children live in poor families.

A number of factors have been identified as having an impact on violence in the community. There has been dramatic social change over the past twenty years. The major source of immigration has shifted from Europe to Latin America and Asia; so much so, that it has been projected that the current Hispanic minority will become the majority in the 21st century (Petersen, Richmond, & Leffert, 1993). Increases in the rates of divorces, remarriage, single parent families, and increase of mothers in the work force

have created changes in family composition (Petersen, et al., 1993). Homelessness has also increased (Cohen, 1996). There has also been an increase in the role of media, particularly television, as a source of socialization instead of the nuclear family (Petersen, et al., 1993).

Changes in social and governmental policies have occurred in response to budget deficits and changes in family structure (Stipek & McCroskey, 1989). Research has just begun to explore the influence of living in different communities and the change in societal structure as it impacts adolescent development (Petersen, et al., 1993).

Henderson (1995) proposed that when nurses are involved in the community through research that reveals inequalities, social action to change unequal distributions could occur. This consciousness raising would necessitate recognition of social, political, economic, and personal constraints to empowerment. Engaging in dialogue with individuals within a population can reveal distortions that restrict empowerment. Theory can emerge by participating with individuals to understand their lived experiences; consequently, facilitating the process of self recovery or empowerment.

Freire (1970) collected data in an ethnographic study over seven years. Although the study population was in South America, the derived theory of oppression has been recognized in work with disenfranchized groups, such as in

populations exposed to violence. Freire (1970) identified concepts of manipulation, domination, oppression, and violence, and concluded that dialogue alters this process in two ways: affirming freedom and leading to enrichment and cultural synthesis.

Nursing interventions grounded in research with disenfranchised groups can contribute to transforming conditions and initiating social change (Drevdahl, 1995). The goal of approaches to community level interventions is to empower people to social action. Data collection needs to not only identify social injustices, but also to acknowledge the capacities of individuals and communities to facilitate social action (Drevdahl, 1995).

Social interactions for families and adolescents occur within the context of the neighborhood or community, making the community a significant setting for adolescent development. Assessment of adolescents within the context of their families and communities will facilitate a more thorough understanding of adolescent development (Panel on High Risk Youth, 1993). Individual differences can be observed while assessing adolescents within their social contexts and daily settings revealing both risks and protective factors (Panel on High Risk Youth, 1993).

Community Violence

The adolescent today faces far greater risk than any other generation (Takanishi, 1993). More adolescents are exposed to drug use at a younger age, and 65% of adolescents report using alcohol before the ninth grade (Takanishi, 1993). The suicide rate for the United States children is double that of twenty-five other countries (Centers for Disease Control, 1997). Every day six teenagers commit suicide (Cohen, 1996). Every 47 seconds, a child is abused or neglected, half of whom are teens (Cohen, 1996).

The 1995 National Risk Behavior Survey (Centers for Disease Control, 1996) reported that 31% of high school males and 8% of high school females carry a weapon, and 14% of high school males carry a weapon on school property. The report also found that 39% of high school students were in a physical fight during the previous year, and indicated 46.1% of participating male students were more likely than 30.6% of the female students to be in a physical fight. Medical treatment for injuries from physical fights occurred in 4.2% of all students during the 12 months prior to the Youth Risk Behavior Surveillance in 1995.

Data from the Youth Risk Behavioral Surveillance for the District of Columbia indicated that 29% of high school students carried a weapon during the month of the survey. Physical fighting during the past year was indicated by 39% of the students (Centers for Disease Control, 1996).

Inner city youth are at particular risk for violence. Thomas (1995) indicated those inner city neighborhoods, particularly the impoverished, are isolated from the mainstream life of America by violence. The increase in the death rate of adolescents, when compared to the decrease in the national death rate, suggests sociocultural and economic determinants (Nichterm, 1992; Public Health Service, 1990). The threatening images of violence are evident when inner city families need not watch violence on television since qunfire can be heard or observed during dinner or from their front porches (Marans, 1994). The data present formidable evidence that asserts the need for adolescents to be perceived as precious commodity and be cultivated to the fullest potential, especially since adolescents have a propensity to reflect the society in which they reside (Elster, 1993).

Nearly one-half (13,220), 49% of the 26,513 homicide victims in the United States in 1991, were males between ages 15 and 34. It is especially disturbing that the leading cause of death for African American men and women between the ages of 15 and 34 is homicide (Centers for Disease Control, 1994). The Federal Bureau of Investigation reported that murder victims were 48% black, 48% white, and 4% Asian,

Pacific Islanders, and Native Americans (Bureau of Justice Statistics, 1997). The murder victims were most likely to be male and young: 77% male, 64% under 35 years, and 12% under age 18 (Bureau of Justice Statistics, 1997).

Approximately one third of all victims of violent crime were between ages 12 to 19; victims under age 25 accounted for almost half of all victims (Bureau of Justice Statistics, 1997). Blacks were more likely than whites and other races to be victims of robbery and aggravated assault. The data also indicated that households with lower incomes were more vulnerable to violent crime: persons with household income less than \$15,000 had significantly higher crime rates than those with \$15,000 or more (Bureau of Justice Statistics, 1997).

The 1995 Youth Risk Behavior Survey indicated that homicide accounted for 20% of all deaths of those between 5 and 24 years of age. Health risk behaviors related to unintentional and intentional injuries are of primary interest for the adolescent population. During the years 1963 through 1991, a pattern of homicide rates changed substantially. The greatest change was for adolescent males, 15 to 19 years, where the rates increased substantially. The Centers for Disease Control (1996) analyzed vital statistics from 1985 to 1994 showing that although the overall rates of homicide increased from 1985 to 1991, the number decreased

during 1992 to 1994. The exception was for the age range of 15 to 24 where total firearm-related homicides and homicide increased then stabilized at record high levels.

Urban areas have the highest rates of crime, and the most violent crime rates are found in neighborhoods with the highest number of individuals in the 10 to 21 age group (Panel on High Risk Youth, 1993). Children living in a violent culture experience change and alterations in everyday life events. Adolescents are influenced by the presence of drugs in their community, even when they are not involved. The presence of drug markets inhibits engaging in normal community activities (Panel on High Risk Youth, 1993).

According to Cook and Cole (1996) between 1985 and 1993 teenage homicide rates more than doubled, and guns accounted for contributing to the increase; furthermore, most school deaths associated with violence from 1992 to 1994 were related to the use of handguns. Family, friends and street sources were identified as aiding in obtaining the weapon (Sheley & Wright, 1992).

Morris (1993) reported on a research project initiated through a joint venture of public health agencies, departments of education, justice, and transportation to plan programs for high-risk youth. The youths, ages 10 to 18, were interviewed in focus groups to collect data on

attitudes, perceptions, and beliefs that affect health behaviors. Parents were interviewed by a focus group as well. There were 24 focus groups in all, made up of African-American, White, Hispanic, and American Indian youths recruited by leaders of community based organizations. The community leaders were also trained to assist as group facilitators.

The discussions indicated that the participants had doubts that violence could be avoided, ascribing this to the availability of weapons and their view that violence was matter-of-fact. The use of weapons along with fighting was identified as a concern for them. Love, family, home, and safety were factors identified as most important, especially when the youth felt that they could be confident and could trust in those factors.

Although the researchers thought the sample was over represented by youths with high risk behaviors, the focus group process was observed to provide an opportunity for openness and critical thinking that had not been available to the youth. The youth were observed to benefit from this exploration which provided the experience to communicate effectively while in a safe environment that was in contrast to their violent and unpredictable lives.

Exposure to Violence

Some researchers have considered exposure to violence as a possible variable for violent behavior. Richters and Martinez (1993) collected data from 165 children ages 6 to 10 in a moderately violent neighborhood in the District of Columbia. The survey was intended to assess the frequency of children witnessing violent acts in the community. Data from 54 children in the fifth and sixth grades indicated that 72% had witnessed violence to someone else, 68% reported that the violence had been near their home and 22% reported that it had been near the school. Fifteen percent had witnessed a mugging at least 7 or 8 times.

A similar survey of 96 urban high school students revealed that 93% had witnessed a violent event, 44 % were victims, and 41.6% had witnessed a murder (Berman, Kurtines, Silverman, & Serafini, 1996). The sample reported a high degree of post-traumatic stress symptoms. The researchers noted that there was indication that levels of social support and coping responses may have a reciprocal relationship with severity of effects of exposure.

Similarly, Fitzpatrick and Boldizar (1993) measured symptoms of post traumatic stress disorder (PTSD) with a revised version of the Purdue Post Traumatic Stress Scale. The sample consisted of 221 low income African American

youths, ages 7 to 18. These findings revealed that 85% had witnessed at least one violent crime with an average of 5 PTSD symptoms. Few of the participants were free of symptoms; such as, recurring nightmares, hypervigilance, heightened startle response, avoidance of stimuli. The researchers did not study what factors contributed to those exposed to violence being free of symptoms.

Bain and Brown (1996) distributed "an exposure to violence questionnaire" to adolescents at an adolescent health clinic in an inner city. Personal witnessing or knowing victims of violence were accounted for in the survey. Respondents were asked about exposures to acts of being robbed with or without a weapon, assaulted with or without a weapon, raped with or without a weapon, shot with a gun, knifed, or murdered. Participants responded to a yes or no for each item, also indicating the number of exposure incidents. The population was 80% female, 55% African American, with a mean age of 15.6 years. The most frequent responses indicated knowing a victim who had been shot (67%), and the witnessing of an assault (37%). More than 10%of subjects had personally witnessed violent acts in each category, except for rape with a weapon, which was 7%. Seventy-six percent of African Americans had personal knowledge of someone being shot, making this the most frequent response. A chi-square test indicated a significant difference (p <0.0005) between racial groups, indicating more African American participants having personal knowledge of someone shot or murdered, and witnessing murder. When compared to a similar study in another inner city, there was no significant difference in 10 of the 18 categories.

Hinton-Nelson, Roberts, and Snyder (1996) measured responses of 89 adolescents in grades 7 and 8 for their exposure to violence and sense of vulnerability. Although the hope scores indicated that the adolescents had hope, 52.7% believed that if an individual were to die the cause of death would be an act of violence.

Adolescence

Concept

The concept of adolescence has changed over decades of American society. The period of the 1920s was a time when the concept of adolescence as a stage of development began to be recognized. The labor force had begun to change after reformers had begun to discourage the hiring of young adolescents.

After World War I, blue-collar workers started to prosper. An increase in numbers expanded the middle class; consequently, the need for wages from their children decreased, enabling the children to attend school. The proportion of 17 year olds to graduate from high school

increased from 3.5% in 1890 to 28.8% in 1920 (Kett, 1993). This trend continued to grow to 49% in 1940 (Kett, 1993). Regular high school graduates in the United States for the year 1992 to 1993 numbered 2,233,241. The District of Columbia reported 3,136 graduates for the same year (U.S. Department of Education, 1998).

According to Kett (1993), the growth of the high school population influenced establishing the parameters of adolescence to the age of secondary students, 14 to 18 years of age. By the 1950s attending high school became a more accepted norm. During this time, parents began to be less restrictive, and the social mores began to accommodate the changes (Kett, 1993).

The 1960s brought further changes in the social structure. The Supreme Court ruled that adolescents had the same procedural rights of adults, and also established a right to privacy (Kett, 1993). Distinctions between adolescents and adults in the social community began to diminish. Teenagers were able to live at home in the community, hold odd jobs, and experience more flexible time frames for school completion (Kett, 1993).

Although these changes offered more independence, the independence is in contradiction with the dependency needs of this age group. Adolescents are dependent on adult persons for support, shelter, security, and provisions that

assure meeting basic needs. This dependency is antithetic to the adolescent who is striving to form a unique identity in preparation for adulthood. Consequently, adolescents and parents work toward a balance of control: the adolescent striving to increase competence and responsibility, and the parents structuring control through monitoring, discipline, and involvement in safety and learning (Strauss, 1994).

Development

Erikson (1963) introduced a theory that describes a process of psychological development of the ego accomplished in stages. Each stage consists of specific milestones that an individual needs to master before the ego reaches maturation and readiness for the subsequent stage. Identity is formulated through this process of ego function.

This process begins with infancy. The infant's experience with consistency and continuity begins the early sense of ego identity. Inner sensations and images are associated with the outer world so that comfort and persons associated with providing comfort become familiar. Erikson (1963) called this stage "basic trust vs. mistrust". The healthy outcome of this stage is differentiation between the infant's inner world and their outer world. The identity occurs within a trusted framework that is part of the infant's cultural life style.

"Shame and Doubt" is the second stage and is a process of the infant becoming comfortable being oneself (Erikson, 1963). There is introspection with behavior and a way of experiencing that is observable to others. The infant begins to test their inner state through a process of "holding on and letting go" (Erikson, 1963, p. 251). There is a gradual developed autonomy of free choice. Difficulty with this stage is expressed as shame experienced by a sense of vulnerability causing the infant to be self conscious, feel increasingly small, and exposed. A loss of control or an overbearing outer control fosters doubt and shame, but self control without a loss of self esteem is expressed in positive attitude toward others and a sense of pride. The mastery of holding on and letting go results in a balanced ratio of love and hate that serves preservation and a sense of justice.

The sense of autonomy prepares the child to have a sense of hope and responsibility that grow together to be expressed as initiative. The ego has a sense of direction and purpose to begin to plan and tackle task making. Insight and moral responsibility are developed through this undertaking. Failure to perform tasks and anticipate opposition results in a sense of guilt, resignation, and anxiety.

As the child begins to apply self to accomplish tasks, gaining recognition, the child experiences pleasure in the completion of the task, "industry vs. inferiority". Erikson (1963) indicated that this is a socially decisive stage since failure results in despair and a loss of hope resulting in a sense of inferiority and inadequacy. The onset of puberty begins a recognizable period of change. The child experiences rapid growth and cognitive and physical development that is observable to others. The term child is generally replaced with the designation of "teen" or youth. Erikson (1963) referred to this stage of development as "identity vs. role confusion". According to Erikson (1963) "all the sameness and continuities relied on earlier are more or less in question again" (p. 261). The tasks are to resolve real or imagined comparisons of how one is perceived by others with the desired sense of self. Completion of this task enables the connection of earlier learned roles and skills with the emerging identity to achieve a new sense of continuity. The youths find themselves having to redo conflicts of earlier years.

The new sense of selfhood is achieved through a process of balancing inner thoughts and feelings with the interpersonal and larger social contexts. The adolescent develops a self-role within the broad context of the lived experiences with relationships and situations (Erikson,

1963). It is necessary that society validates the adolescent's self view and offers recognition to the emerging young adult. Family, community, and school provide contact and experiences that offer opportunity for identification with a variety of persons among different age groups. The final identity that is fixed at the end of adolescence includes those identifications that are significant and altered by the adolescent to create a unique and coherent whole (Erikson, 1980). The optimal sense of identity is one that is congruent with a sense of psychosocial well being (Erikson, 1980).

A negative identity is based on undesirable identifications that occurred during critical phases (Erikson, 1980). The adolescent protests the perceived loss of their potential and possible greatness through antagonism toward roles that are offered as desirable. The young person is caught in confusion between a sense of disbelief that change might occur and a simultaneous fear of change (Erikson, 1980). This conflict results in the adolescent experiencing an inability to choose a role and develop a sense of identity (Erikson, 1980).

Role confusion is a state in which the adolescent is more vulnerable to violence. Violence in the community interferes with a sense of personal security and safety

which is necessary for developing skills, a sense of belonging, and a sense of a future (Strauss, 1994).

When the process of identity development is successfully achieved, the young adult is ready for commitment and partnership. Young adulthood is characterized by the developmental task of "intimacy vs. isolation" (Erikson, 1963). Intimacy occurs with a binding ethical commitment and strength of ego that experiences fusion with others without fear of ego loss. The inability to achieve this process is expressed as isolation, avoidance, or self-absorption.

Narrative

Narratives consist of sequences of events, actions, thoughts, and feelings. People's elementary beliefs and premises enter into narratives (Bruner, 1990). The narrative forges meaning by interpreting deviations from cultural norms into terms of established patterns of belief. The story is an accounting of reasons for the meanings that are given to encountered exceptions to the ordinary. Self stories contain both cultural convention and deviation explained in terms of individual intentions; consequently, the protagonist interprets circumstances and their meanings into a personal narrative (Bruner, 1990).

The narrative can contain many life changing dialogues.

The relationships of words and expressions to one another

and the accompanying references, there being no limit to either, constitute the sphere of meaning (Bruner, 1986).

Meaning is socially developed and determined by the cultural framework within which people live and socially function (Bruner, 1990). Language, values, and social relationships are essential to meaning.

As a story unfolds, the self is conceptualized as a process of changing thoughts, feelings, and actions (Polkinghorne, 1995). The self stories provide unifying identities formed by past experiences, emotional responses, multiple themes with temporality and sequential movement occurring in the past, present, and future.

Bruner (1994) suggested that a continuous self narrative is a process that provides continuity, bridging the past and the present. Bruner (1994) added that the process is narrated not only by a single or main self narration, but by sets, reasoning that different reference groups influence a set of related different selves.

Although it is not possible to observe persons throughout their life and developmental stages, it is possible to do retrospective inquiry through the self narrative (Bruner, 1990). The self view as revealed in narrative demonstrates a congruence with history and turning points that are linked to outside events, inside happenings, or changes in belief or emotive expression.

The narrative is not neutral and it has order (Polkinghorne, 1995). The representations of the past are interconnected with the event of the teller and the listener intersecting time and space (Tonkin, 1992). A person develops a means of understanding the outside world by processing and internalizing events and interactions. The interpretation of the narrative proffers connections as a cogent way to understand complexities of events.

Tonkin (1992) investigated the construction and interpretation of oral histories by crossing differing disciplines such as linguistics, history, and psychology, to expand the use and respect of narration of the past.

Additionally, the investigation considered the interconnections of memory, cognition, and history as contributors to shaping the self of the individual.

According to Tonkin (1992), individuals are social beings formed in interaction, reproducing, and altering the societies of which they are members. The individual's understanding of the past, both experience and representations, models the person's present and future.

Myerhoff (1978) used narrative and life history as sources for data collection. Myerhoff (1978) approached the life story as a collection of events and actions that emerge into a story of the person. She operationalized the word, remembering, as a process of "re-remembering": a process

that assists the aging into a social role through the telling of rituals and cultural performances. Myerhoff (1978) demonstrated the value of storytelling to be an impressive resource for understanding the complexity of a person's life.

Language and verbal representations are ordered in patterns of discourse that offer meanings for events.

"Meanings exist because people mean and others believe they understand what was meant" (Tonkin, 1992, p. 2). Although a child learns to talk, the meaning of the language is learned through the interaction with other humans. Babies are not passive receptacles, according to Tonkin (1992), but have the ability to direct reactions and integrate them.

Narrative, Socialization, and Development

The self of a person is represented through the entrance into a dialogue that occurs within and is affected by social interaction. Social relations suggest both "continuity and discontinuity in time" (Tonkin, 1992, p. 111).

Schieffelin and Ochs (1995) related the study of culture and individuals from a perspective of the impact of language on socialization. The authors explained that a child observes language, learns language, and acquires language skills and social skills. A major premise of their work was that knowledge of linguistics serves as a cultural

framework for understanding human relatedness to environment and others.

Miller, Potts, Fung, Hoogstra, and Mintz (1990) presented an ethnopsychological perspective of stories as being linked to two issues. The first issue is the cross cultural variation in notions of self and personhood. The second is how language emerges as a cross cultural tool to understand selfhood. Self narratives that envelop personal experiences provide sequence and self relevant meanings that are both implicit and explicit. Stories can also be utilized as a perspective for domains of socialization, such as morality.

Miller, Potts, and others (1990) viewed storytelling as a function of the social construction of self. Studies of children's stories indicated that characterization occurred as an intersection of self, narrative, and face to face interaction. The child, during the course of self narrative, develops tools for organizing a self that changes interpersonal and intrapersonal functioning.

Indicating that narratives of children had not been an interest for research, Miller (1994) studied the narratives of children to further the understanding of the role of narrative in socialization and self construction. Aspects of the conceptual framework for the study included assumptions that (a) the continuity of identity is temporal, (b)

narrative represents human action that generates self understanding through linguistic replication, (c) narrative is self evaluative, and (d) narrative has a conversational affinity. The researcher intended to answer the questions:

(a) is storytelling routinely practiced in everyday family life?, (b) what forms of storytelling take place?, (c) how is storytelling practiced with reference to children?, (d) what are the implications of self construction in early childhood?

The ethnographic study took place in an ethnic diverse section of Baltimore with a sample of single mothers and their 30 to 36 month old children. Forty hours of videotaped observations of four families were studied. The observations demonstrated that stories were told around children for a total time of 8.5 hours during 38 of the 40 videotaped hours.

Miller (1994) concluded that self identity was accomplished through expanded access to the experience of significant others (through stories), gained experiences that occurred in another time, and gained knowledge of experiences that were spatially inaccessible to the child. Consequently, the stories provided affective and cognitive experiences that would otherwise be inaccessible to the child.

The child was also observed as a co-narrator, and was observed to benefit from the conjoint experience by being a self protagonist while distinguishing self as apart from others. This study demonstrated that narrative emerges as a dynamic, reconstructive, and socially distributed process.

Attinasi and Friedrich (1995) approached dialogue as a sharing and exchanging of ideas and emotions through natural language. They named dialogue as two-folk-speak. Two-folk-speak consists of five interrelated features, as follows:

(a) language involves speech, behavior, symbols with their deep resources in reasons, motivations, and emotions; (b) motive factors that promote agreement, harmony, or polarization; (c) the dialogue involves a change in power or a distribution of power; (d) the intensity of the phenomenon regardless of the physical milieu; and (e) the interlocutors moving through the dialogue into continuity, partial mingling, and fusion.

The authors described a dialogic breakthrough as occurring when the dialogue acts as a change agent, or even as a process of transmuting the participants. They called this concept the "life changing dialogue". The phenomenological center of the dialogue occurs in the meeting of the "imaginations" of the narrators (p.38).

The life changing dialogues are catalysts of change between dialoguing imaginations. Engaging in life changing

dialogues is a defining human quality. The dialogues are crucial to change, and change occurs as a result of the participants' use of affective and physical energies in their life.

Similarly, Bruner (1990) being consistent with the ideology that human minds and lives reflect culture and history, as well as biological and physical resources, proposed that constructed selves are outcomes of the meanings that are produced from culturally shaped notions. It makes sense then that personally ascribed meaning and cultural cohesion are derived from the ways people organize their self and world-views.

These events are richly described in the narrative producing "an account of what one thinks one did, in what settings, in what ways, for what felt reasons" (Bruner, 1994, p. 119). The development of Bruner's intent about the self and narrative is consistent with those of Attinasi and Friedrich (1995).

Additionally, Bruner (1994) proposed that self accounts can consist of dissonance or turning points that occur when outside views of self influence a change in the inside view of self. The turning points redirect the self agency. This agency consists of an "inside out" self, but also an "outside in" self that integrates shared values of others

(Bruner 1994). The events serve as a function to clarify self concept.

Bruner (1994) viewed the storied self as derived through the development of language and the telling of stories about self, similar to the empirical findings of Miller (1994). The dialogic self is differentiated from the storied self as it involves another interlocutor concluding that the self can adapt. Role playing allows appropriate adaptation to the situational aspects of the dialogue.

Divergence with the propositions of Attinasi and Friedrich (1995) is noted in Bruner's (1994) discussion of self concept as a construct of "agency" and "victimicy". The author proposed that the self as agency could operate autonomously by states of wishes, beliefs, and desire. At times when another individual's agency is stronger than one's own, a reactive self agency which Bruner named victimicy is formed. The self develops through these consistent and formalized schematic operations. Bruner (1994) concluded:

Culture is a powerful subsystem for specifying possible ways of knowing, striving, feeling, acting with respect to others and ourselves. Culture, through its sources of narratives and its formulas for devising them, defines different ways not only of conceiving the present states of being, but also our past and future states. It is a

premier source of plans for constructing our lives and our selves (p. 52, 53).

Narrative and Identity

According to Manusco and Sarbin (1983), the narrative sanctions meaning, so when meaningful interpretations of a self are discovered through narrative process, an identity is revealed as well. Manusco and Sarbin (1983) stated that social identity is revealed in the "who am I".

Personal meaning is socially developed, and is determined by the cultural framework within which people live and socially function (Baumeister, 1991). Within the essential structures of language, values, and social relationships, an individual formulates a meaning of life. Properties of life occur through unity and change, are bound in time, and are inclusive of needs and wants (Baumeister, 1991).

According to Baumeister (1991), association and distinction make up the basic building blocks of meaning, and meaning acquired through shared mental representations provides connection. The connections make varied and complex patterns that promote humanness. The essence of meaning, as explained by Baumeister (1991) is the connection of objects, events, and concepts through shared mental representations.

Since meaning imposes control, order, and predictability, it is an important aspect of stability (Baumeister, 1991). Important to meanings are ideologies that support interpretation and evaluation of events in persons' lives. The ideologies serve two functions: learning and control. Learning helps to discern patterns that enable prediction, and control is demonstrated through the self control to make decisions and regulate emotions.

Baumeister (1991) found through content analysis of narratives that for life to have meaning, it has to make sense in four ways. The first is a definition of purpose that occurs when one interprets present events in relation to the future. This is acquired through goals and fulfillment, which can be both intrinsic and extrinsic.

Secondly, meanings of life are analyzed in terms and values, which enable justification and legitimization of past or present actions. Thirdly, an efficacy of self that is strong, capable, and competent evolves through meaning. Finally, meaning provides a self worth expressed as self respect for self and others.

Baumeister (1991) proposed that these four aspects of meaning guide narrative thought. The narrative accounts of persons' lives emphasize meaning making and social understanding of their experiences.

McAdams (1988, 1990, 1995) accepted some of the premises of Erikson (1963) with regard to the narrative and development of child and adolescent. Although McAdams (1990) determined that young children invent images, patterns, and symbols in order to define who they are, adolescents were identified as seeking an abstract system of beliefs and values, that is, an ideology. Adolescents and adults reconstruct their pasts in a historical content that justifies their present stance in the world. "By the end of adolescence the person has consolidated an ideological setting for the identity story" (McAdams, 1990, p. 165).

According to McAdams (1990), the narrative account is complete with protagonists of heroes or villains, and is an integration that specifies setting, scene, character, plot, and theme. Stories organize motives, and the motives give the story a characteristic thematic quality. In the reconstruction of the past, critical incidents affect the plot. McAdams (1990) termed these nuclear episodes.

Nuclear episodes are two types: continuity and change.

The continuity episode affirms the narrator identity,

maintaining "proof from the past" and "I am what I am".

Other continuity episodes serve as the "origin myth"

detailing explanation of one's present life situation

(McAdams, 1990, p. 169). Nuclear episodes of change indicate turning points, which may be positive or negative.

The content of nuclear episodes is further characterized by themes of agency or communion. The "agentic" nuclear episode highlights independence, autonomy, self definition, status, or prestige (McAdams, 1990). Communal nuclear episodes involve mutual sharing and feelings of heightened love.

McAdams (1990) used the term imago to refer to the main characters in a person's life story. "The imago is a personified and idealized image of self that functions as a protagonist in a life story" (McAdams, 1990, p. 174).

Imagoes are highly crafted parts of the self, and a life story may contain one imago or many. The playing out of the imagoes construct unity and purpose in life as the adult refines narrative character through expression of various imagoes and reconciliation of conflict among different imagoes.

Similarly, Bruner (1994) described the self as constructs of "agency", "victimicy", "consistency", and "tendency". The agency is a self that operates autonomously by wishes, beliefs, desires, and so on. When another's agency is stronger and takes control over one's agency, the self construct is then called victimicy. These aspects formalize schematic operations that construct the consistency self. This can be impacted by what Bruner (1994) terms turning points that effect a changed self. The

tendency to respond to others and to integrate shared values is explained as an inside self and an outside self. These statements support that identity is a storied self that is continually written, and as a storied self, must be understood in storied terms.

Furthermore, like McAdams (1990), Bruner (1986) proposed that identity as a storied self must be understood in storied terms. These terms, according to Bruner (1986) consist of imagery, plot, scene, setting, conflict, character, and ending.

Narrative research and nursing

Similarly, personal life changing dialogues can contribute to the holistic nursing assessment of persons under their care. Life changing dialogue can lead to valuable truths about human interrelations and qualitative change. These truths can influence the search of positive aspects of the nurse patient relationship, and perhaps offer more evidence to describe something mutually satisfying. At the very least, it could offer a true reality of the person that demonstrates the individual's autonomy.

Mattingly (1991) proposed that narratives give us information about how a physiological condition affects a person's life. The use of personal storytelling can offer the nurse a perspective on the impact of events on a person's self view. Through listening to the person's story

of their experiences, the nurse can gain a vantage point to assist integration of healing.

The narrative beautifully illustrates a person's world-view. Engaging in storytelling provides a wealth of data that reveal selfhood, culture, social experience, and an understanding of turning points. This understanding enables meaningful and individualistic interventions.

Picard (1991) pointed out the significance and importance of the role of stories for nurses. Reviewing stories as told by patients with cancer revealed the narrative event as significant in the meanings that a particular person had to offer. Story has a way of creating a relationship and serves as a medium for universal ways of communicating. The process of telling a story can be healing because it is intimate and can bring the distance of the epoch of the event into the present (Picard, 1991).

Using a case study, Rawnsley (1994) described the ordeal of a patient struggling with a recurrence of cancer. The author presented a reformation of the ordeal and suffering as a phenomenon of courage and self affirmation. This transformation occurred in spite of the disease and consequential conditions. The author transcribed the dialogue in order to capture the encounter between the patient and the nurse.

According to Rawnsley (1994) the dialogue transcended the past, present, and future (time), offering the reader a moment of reality in the life changing process. During this brief interaction, Rawnsley (1994) discovered the emergence of courage, and saw courage as a potential concept for self affirmation.

Rawnsley (1994) stated "an interpretive approach to the narrative account...discloses themes central to the human spirit..." (p. 342). Continuing with "the significance of the narrative as an inquiry approach lies within its potential for disclosing embedded meaning: the narrative intersects the world of the reader with the world of the text, allowing the reader to imagine inhabiting the same world" (p. 345).

Additional support of this premise is presented by Smithbattle (1994), who stated that narratives are a source of experimental understanding which can foster a developmental concept. The use of narrative can enhance scientific findings by exposing a personal history, meanings, relationships, family practices, and sociocultural contexts. As a result, stories promote shared understandings developed within a sociocultural tradition.

Smithbattle (1994) elucidated these statements through phenomenological interpretations of teen mothers' narratives. The study affirmed a shift in attention from a singular narrow interest in identifying norm-based deficits

and failures of teen mothers to a revelation of difficulties, conflicts, and impressions of positive and potential possibilities for development as experienced by young mothers.

Smithbattle (1994) observed that implementation of narrative research made possible the "move away from the language, distance, and stigma of normalizing disciplinary practices to a dialogue that hears and heeds their words" (p. 163). The disclosure that occurs in narrative allows a reader to have respect of meanings, obstacles, options, and possibilities that might otherwise not be discovered.

Similarly, Stuhlmiller (1994) found narrative research to be an effective method for understanding the experiences of rescue workers during disaster. Narratives gave credence to the value and meanings of the experience of the rescue workers in contrast to those techniques that guide what information is elicited. The researcher found that the "simple acknowledgment that their story was important, that they had something worthwhile to offer to others, allowed individuals to come forth and share experiences..." (1994, p. 348).

Stuhlmiller (1994) agreed that cultural experience is transmitted through narratives and results in historical continuity. The researcher was impressed that courage and human possibility, as well as fear and vulnerability, were

reflected in the narratives. The accounts in Stuhlmiller's study (1994) provided a vision of the value and integrity of life that otherwise might have gone unacknowledged.

Hall (1996) relied on narrative as a longitudinal means of approaching places and events of the past, and furthermore that narrative allows for patterns of current difficulties to be less focused on pathologic interpretation and to be more comprehensible. The researcher studied narratives of women who were survivors of sexual abuse. Taking the perspective of childhood environment, Hall explored the idea that interventions could be derived from knowing what women depended on from the environment to help their survival.

Hall (1996) found that storytelling enabled women to recall situations with some detachment and with an advantage of maturity and safety. The narratives took place over three sessions, which permitted disclosure of self in layers. The researcher thought that, because of the volume and sensitive nature of the data, structured periods of rest would be supportive. Twenty participants participated in three in depth interviews with one to two week intervals totaling sixty interviews. Each interview lasted about two hours and was audio-taped. The tapes were then transcribed verbatim.

In addition, the researcher systematically documented nonverbal behaviors, power dynamics, content, support from the researcher, and emotional responses. The sample was a nonrandom purposive sample, and snowball sampling proceeded form the initial interviews.

The researcher described beginning the analysis with a successive reading of the three interview transcripts of each participant. During each reading the researcher engaged in a different type of exploration. Stories were examined and story lines were diagrammed. The examination included dissecting plots, identifying operative actions, and scrutinizing interpretation of events. The researcher then mapped out associative links among the stories and compared renderings across the interview times.

A second reading was done to understand the individual from a developmental perspective. The third reading considered the environment: the home, school, and community. This included an examination of the perceptions of safety hazards related to environmental conditions at home, school, and neighborhood or community.

The researcher then compared accounts through a matrix analytic framework, cross classifying descriptions about participation at home, school, and community in a search for patterns of vulnerability in an environmental context. A comparison of subgroups revealed differences according to

ethnicity, race, family composition, types, and circumstances of abuse and after effects. Memos were used to document analytic insights. Salient exemplar quotes were printed to support analytic arguments.

The analysis as described by Hall (1996) demonstrated that although the participants are supported to be free in their storytelling, the researcher must be disciplined in the phase of analysis. The presentation of steps in the analysis clearly relate to the purpose of the study (Hall, 1996).

Sandelowski,, Holditch-Davis, and Harris (1990) conducted multiple interviews with fifty-three infertile couples and a comparison group of ten couples with no fertility impairments. Each interview was conducted for a total of three hours. Similarly, these interviews were audiotaped and transcribed verbatim. Techniques were consistent with grounded theory research.

Theoretical sampling was accomplished through multiple open ended and focused questions. Each interview was approached with an invitation for the couple to tell their story of infertility, and the couple was guided to focus on elements of the narratives that emerged as theoretically important.

The researchers explained the aspects of the process in more detail in an earlier publication (Sandelowski,

Holditch-Davis, & Harris, 1989). The authors described the open-ended question as intended to not only focus thoughts, but to allow freedom of expression. They suggested that the substance and direction of each interview vary with subject responses. The information sought was, as follows: (a) couples' response to the confirmation of pregnancy, (b) adjustment to being expected parents, (c) couple's preparation, (d) response to parenting, and (e) ongoing adjustment to being parents.

Nelson (1996) researched a convenience sample of nine women with breast cancer. Unstructured interviews were used, and leading questions were avoided in order to allow the participant to move freely through the narrative.

The process described by the researchers fit Bruner's (1994) description specifying a forward movement of description of actions making the retrospective understanding of self possible. Consistent with narrative theory, the stories represented a coherence that made sense and was consistent with past experience.

Conclusion

Stories provide a linkage to an understanding of a person's life experiences. Listening to stories of self as told by the person allows research to transcend a specific theoretical model. The interpretation lies within the text of the teller, rather than within the framework of the

listener. This enables the researcher to have a rich contextual understanding of the world of the storyteller. The story enables the researcher to get a glimpse into the cultural and social realities of the person. Stories cross cultural boundaries, and provide a clearer understanding of the particular personal meanings that represent the life experiences of another.

Exposure to community violence is an experience that is not considered a factor in the lives of adolescents. When young people witness violence, it is generally ascribed to extraordinary circumstances. The narratives of adolescents exposed to community violence can help to identify how these experiences impact on aspects of the identity development of the young people during this crucial period.

CHAPTER III

Methodology

The purpose of this study was to describe the effects of exposure to violence in an inner city community on aspects of adolescents' identity development during this critical phase. This chapter describes the methodology that was used in this study. Research design, data collection, and data analysis was presented and explained. Narrative analysis was presented as a method to analyze the adolescents' interpretations of their experiences with exposure to violence in their community.

Design

The design of this study was an inductive qualitative design to discover the contextual meanings of exposure to community violence that were internalized during the developmental span of adolescence. Data emerged from the self-narratives, or stories as told by the adolescent participants. Data were collected during an audio-taped interview appointment.

Theoretical Considerations

Narrative analysis guided the process of data collection. Narrative analysis is a method of understanding the personal meanings ascribed to events and experiences. These constructed meanings are revealed in the self-narratives told by the participants in the study.

Narratives, or stories reflect the experiences of an individual that take place in the larger cultural system (Denzin, 1997). They explain the lived experiences, life events, and social relationships that surround and shape a person.

As Mishler (1986) suggested, we can accomplish knowing an individual by listening to the stories. Self-stories are "testimonies to the ability of the human being to endure, prevail, and triumph over structural forces that threaten at any moment to annihilate us (Denzin, 1997, p.83).

The use of the self story or narrative provides a context for the researcher to understand the way human beings give meanings to their experiences, and how persons enact their lives (Sandelowski, 1991). Understanding a person through their stories has potential significance and value to researchers since the unique humanness of individual lives, which is not generally included in conventional methodological analysis, is an integral part of the resulting data (Sandelowski, 1991).

Narrative analysis requires the researcher to transform a narrator's accounting of events with ascribed meanings and interpretations into data (Bailey, 1996). The researcher must be able to hear the worldview of the narrator not only to achieve genuine understanding, but also

to enable that information to be presented to other researchers so that further exploration or intervention can occur. The narrative analysis constructs the meanings that emerge from the life story in order to produce trustworthy data that are applicable to research, yet remain faithful to the contextual originality of each story (Ayres & Poirier, 1996).

The analysis of self-narratives provides data that reveal major characteristics of the self. The narrative provides a medium to study the continuity of self- identity over a period of time. The study of the young adults' stories will focus on the coherence and continuity of this stage of development as revealed in the individual descriptions.

Other characteristics revealed in self-stories are descriptions of the interpersonal self-identity and self reflection (Linde, 1993). The life story reveals to the listener how a person measures or considers their self-identity in relationships with others. Additionally, the stories present a picture of the spontaneous, automatic, or habitual aspects of how one sees oneself as an individual, the reflexivity of the self.

These aspects of the self- narratives provide self evaluation, specifically in areas of moral evaluation, value identification, and thoughts of utility in the past,

present, and future. The researcher is privy to the personal development and experiences of an individual expressed in the meanings and interpretations of the research participant.

Sample

Since theory will be generated from the experiences and lives of adolescents, adolescents were the participants in this study. It was essential to the researcher that the participants were at the late stage of adolescence since it is recognized as a period symbolic for completion of the developmental task of identity. Additionally, adolescents in this age group are capable of understanding consequences of actions and events, and are able to abstract how life experiences affect their self-identity.

The participants were at least 18 and no older than 21 years of age, had exposure to community violence, and (by self-report) had not received mental health interventions for behaviors consistent with diagnosed psychiatric disorders. Participants who self reported being convicted of a crime were excluded from this study.

Participants were recruited through nonrandom sampling methods, and all who met the criteria had an opportunity to participate. Key informants in community youth programs discussed the research study with a group of youths and asked for volunteers. Additionally, snowballing from the

initial participants occurred, and was accepted by the researcher. Key informants asked those interested in the study to contact the researcher, or give permission for the researcher to contact them. The interested participants indicated on a contact sheet their name and telephone number, and the exclusion criteria of incarceration or psychiatric treatment, a history of psychiatric care or incarceration (Appendix A). The researcher met personally with each youth that expressed interest and explained the study in detail.

A maximum number of twenty participants was established in order to generate sufficient data that would support theory development and adequacy of the study while keeping the data manageable. Recruitment of participants continued until theoretical sampling yielded the desired density of data that supports concept development (Strauss, 1994). The total number was determined by the nature of the data collected as a whole, and until no new themes or patterns emerged (Sandelowski, Holditch-Davis, & Harris, 1989).

The participants were willing to tell their stories for a minimum of one hour to a maximum of three hours. The participants were aware that the interview could be one hour in length for three sessions, or one session for a maximum of three hours. The participants and the researcher determined whether to have one continuous session, or

consecutive one-hour sessions. The amount of data, sensitivity of data, and fatigue level of participant supported the decision for the length of the interview. This time frame was consistent with a review of nursing publications describing narratives as a method for collecting data (Hall, 1996; Sandelowski, Holditch-Davis, & Harris, 1990; Smithbattle, 1994; Stuhlmiller, 1994). The participant chose one long session.

Setting

Recruitment of subjects was obtained from key informants involved in urban youth organizations. These organizations were within an area that had been cited in the media as having high numbers of violent events. The researcher contacted these organizations and met with the directors of each program. The directors identified key informants for the researcher to work with. The key informants supported the study and utilized opportunities to offer participation in the study to potential participants.

The interviews took place in a private area that was convenient and safe for the participant and the researcher. The key informants were approached to assist with the location of a comfortable and private area conducive to lengthy interview.

Protection of Human Subjects

Informed consent was required for all study participants. The researcher was obligated to the participants in the study. Any concerns regarding the consent for the study was discussed. Participants' well being took precedence over the research. The participant could choose not to participate at any time during the study without reprisal. The researcher was respectful of the volume and sensitivity of the narrative content. There were structured periods of rest between the interviews, and use of one hour sessions was offered to the participants to allow for disclosure in layers (Hall, 1996). All interviews were identified with a code, so that no identifying names were attached. Consent forms and other personal data were kept separate from the interviews in a secure place, where only the researcher had access. The audio-tapes were destroyed after transcription. A copy of the informed consent is included (Appendix B).

The sensitive nature of the stories could create some emotional discomfort for the participants. The participants were consulted about this. The researcher is an experienced psychiatric mental health nurse who can interview and respond appropriately. The researcher is in private practice in the capacity of a psychotherapist that requires query into sensitive and personal information during one to one

interviews. The participants were advised that the researcher did not have immunity for knowledge of criminal activity that is revealed during the interview.

The participants were also informed of possible positive effects of sharing their experiences, and that having an opportunity to be heard could be worthwhile. Their responses gave credence to the value and meaning of their encounters (Stuhlmiller, 1994).

Instrumentation

Demographic Sheet

The participants were asked to complete a demographic sheet (Appendix C). This information was used to describe the sample during data analysis. It was completed after the informed consent, and prior to the story telling.

The form collected information to describe the age, gender, and ethnic background of the participant. The participant was also asked family size, relationship to members of the household, the type of exposure to violence, frequency of violence, and place of exposure.

Age Line

An age line facilitated and organized the narrative. A copy of this is included (Appendix D). The age line is a straight line with markings for each year of adolescence, 13 through 20. The age markers served as a structure to identify specific turning points or events that occurred

during adolescence. The turning points or events mark the major changes or demarcations of periods of adolescent life (Mandelbaum, 1982). The age line became a framework to guide the participant and researcher to reveal a narrative that conveyed dimensions or aspects of their lives, principle turning points, life conditions, and characteristic modes of adaptation.

The stories were also guided to include cultural factors and social factors. The cultural factors provided the scenario for their life events, such as understandings and expectations for behavioral patterns (Mandelbaum, 1982). The social aspects revealed conflicts and resolutions, the interplay of relationships in which the participants played roles, and changed the nature of their choices and shifts in their cultural selves (Mandelbaum, 1982). The emotional and psychological aspects were also revealed in the unfolding of the self-story.

The researcher introduced the general theme with an open ended question that was intended to focus thoughts while allowing expression without constraint (Sandelowski, et al., 1989). "Certain kinds of open ended questions are more likely than others to encourage narrative. It is preferred to ask questions that open up topics and allow the respondents to construct answers" (Riessman, 1993, p. 54). The researcher began the process:

Let's begin with your age line. Tell me a story about how these events influenced your becoming the person you are now. Tell me your story in your own words.

Stories generally have a beginning, middle, and end.

There is no right way or wrong way to tell a story. The story could tell how the (those) exposure (s) to violent event(s) in your community affected your self image, thoughts of right and wrong, feelings of security and safety, view of the future, and meanings of your experience and life. You might have your own story to tell. Take your time, and just say what comes to mind. (Riessman, 1993)

Substance and direction varied with participants' responses. The researcher was prepared to use open ended questions to promote discussion as the story unfolded across the age line. The open ended questions structured the narrative to gather data that answered the query about the effects of exposure to community violence as interpreted by the researcher. Other interviewing techniques were used as appropriate; such as focusing, exploring and probing questions. The participants were willing and very capable in their storytelling. The objective was to provide data that answer the following:

1. What are the participants' interpretations of their exposure(s) to violence?

- 2. What meanings do adolescents ascribe to the acts of violence?
- 3. What are the cultural meanings of violence for the adolescent?
- 4. How does exposure to violence affect the adolescents' self view?
- 5. How does exposure to violence affect the adolescents' view of the future?
- 6. How does exposure to violence affect the adolescents' interpersonal relationships?
- 7. How does exposure to violence affect the adolescents' ideology of right or wrong?
- 8. How does exposure to violence affect the adolescents' behavior?

Probing questions would be used as necessary to get information regarding timing, details of events, further explanation, or clarification (Sandelowski, et al., 1989). According to Mishler (1986), it is crucial that the narrative session maintains the natural and pervasive modes of communicating meanings through the telling of the selfstory. The researcher strives to enter the presentation of the story without influence of prior assumptions, and to understand the meanings of personal experiences from the perspective of the storyteller.

Procedure

Data Collection

Once identified by the key informants, the researcher contacted willing participants by telephone or in person to set up an initial meeting. During the initial meeting, the purpose of the study, expectations of participation, and informed consent were explained to the potential participants. After information was exchanged and a consent form was signed, an appointment was set up for the first interview. Data collection did not begin until after informed consent was obtained. The participant understood that data were taken from the telling of their personal story; therefore, it was necessary that participants were aware that audio-taping and note writing would occur.

The process of storytelling was repeated for a maximum of three hours, or three meetings. All stories were recorded on audio-tape. During the taping of the story, the researcher made notations of non-verbal, emotive expression, pauses, and other contextual data that would not be detailed on the tape (Sandelowski, 1989).

The tapes were transcribed into a written text. The narrative was transcribed with a margin to the left for numbering, and a wide margin on the right side of the paper for transcription of the researcher's notations and codes.

Each line of transcription was numbered, starting with 001.

A list of codes is included in Appendix E. The tapes were destroyed after transcription was completed.

The researcher used a Contact Summary Sheet (Miles & Huberman, 1994). This sheet helped to facilitate planning for the next contact. This sheet contained notes that revealed contextual data that could not be obtained through the narrative alone. The researcher commented on this form at the conclusion of the interview. Comments were made regarding any main issues or themes, any salient or illuminating points during the contact, and a summary of information obtained or not obtained during the contact with the participant. The researcher indicated on the form any additional information needed during the next interview meeting. A copy of the form is found in Appendix F.

Data Management

All data, tapes, transcriptions, forms, were coded in order to protect the confidentiality of the participants.

All transcriptions were preserved on two computer discs for safety. All materials were kept by the researcher, and protected in respect of the participants. Data were kept during the dissertation process and until completion of the dissertation. After the process was completed, all identifying information was destroyed.

Narrative

The goal of narrative, storytelling, was to provide a means of inquiry for the researcher to capture the interpretation of events and experiences related in the lives of participants as they are exposed to violence in the community (Jenks, 1995). The process began with the researcher presenting the participant with a paper that had a line demarcated with ages 13 through 20, as below:

age 13 14 15 16 17 18 __19 ___20

The line stretched across the length of an 8 by 11 sheet of paper. There was enough space between the ages for the participant to write notations. The participant was asked to write down any significant events by age that influenced their life, or had influence as related to the study (Woodhouse, 1992). This facilitated remembering and organizing the story, as it supported a starting point. After the age line was completed, the researcher asked the participant to begin to tell a story of their adolescent years, a narrative of specific events, especially exposure to violence and their interpretations of the events. The age line was used as a guide to assure inclusion of identified key or memorable events. Probing questions were used to invite detail and to facilitate data in answer to the research questions.

If the researcher approaches the participant as desiring dialogue, almost any opening question can generate a story (Riessman, 1993). Furthermore, the participants can make stories out of reportable events, and experiential phenomenon can gain value through a lengthy account (Riessman, 1993).

Researcher and Rigor

During the process of data collection the researcher kept field notes. These field notes were used during the process of data collection and data analysis. Rodgers and Cowles (1993) recommended maintaining four types of field notes: (a) contextual notes, (b) methodological notes, (c) analytic documentation, (d) personal notes.

Contextual notes contained descriptions of observations not detected on audio-tape. These highlighted distractions, interruptions, settings, and activities. They also contained artifacts such as, current newspaper clippings, that might have influenced the participants' views or actions during the data collection period.

Methodological notes documented the focus of the questions. Any changes in questions, decisions, and rationale for procedures were substantiated.

Analytic documentation contributed to the process of analysis. These notes reveal the thought processes behind sorting, categorizing, and comparing the data. They also

document all phases of analysis, speculation, and theoretical insights. The researcher's thoughts regarding clustering and themes were recorded; consequently, an understanding of the emergent theory will be available for reexamination if necessary.

Personal notes produce a reflexive journal on the process of self awareness. Throughout the study, the researcher documented biases and decisions. This recording provided the researcher with an outlet for catharsis since some of the stories contained sensitive or emotive content.

Bailey (1996) recommended that validity in narrative analysis is a matter of verisimilitude. It is important that the truth and reality of the data be grounded and supported. The researcher must move the process to its readers while retaining authenticity. The research is validated by provision of systematic procedures so that the scientific world can understand the data by visual tracking of the linkages, findings, and interpretations (Bailey, 1996). The original data will be presented through a transcription of information and a clear outline of the procedure. This will enable other researchers to replicate the study. Analysis will be conducted so that the reader can not only see how interpretations occurred, but can see what was done with the narrative data. These provisions allow readers to determine the trustworthiness (Riessman, 1993).

Analysis of Data

Data from the demographic sheet were used to describe the sample. The data were also used to support, illustrate, compare, and contrast the findings.

The analysis of the narrative began with the text that conveys the voice of the teller as it presents points of view in its own figurative language (Ayres & Poirier, 1996). The analysis transposed lived experiences into a context of data to contribute to the knowledge of effects of exposure to community violence on adolescent interpretations. As a result of the analysis, a new context will emerge yet remain faithful to its origins in the narrative (Ayers & Poirier, 1996).

Riessman (1993) recommended a lengthy contemplation and examination of the transcription drafts as a start. The author indicated that this generates the inductive process causing the focus for the analysis to become clearer. The features of the story speak to the reader and are the precursors to interpretation (Riessman, 1993). This researcher read each transcription several times.

The second step was a comprehensive review of all stories guided by six categories of narrative identified by Mishler (1986, p.80). These categories were coded on the transcript. This process was initiated by numbering each

line of the transcript. This step was followed by the assignment of codes.

- 1. Complicating action the narrative clauses that maintain structural and temporal sequence.
- Abstract the narrator's summarization of the story.
 - 3. Orientation time, place, persons are identified.
 - 4. Resolution provides the results of action.
- 5. Coda returns the narrator to the present situation.
- 6. Evaluation the narrator indicates the point of the story.

Following the coding, each transcript had a first reading to observe coherence, starting and ending points, temporal sequence, and sequencing of events (Denzin, 1989; Sandelowski, 1994). The reading also assessed for a sense of continuity. A continuity of self is also a sense of oneness. This sense is supported not only through language, but the continuity of memory through time which develops very early in life (Linde, 1993). The ability to create a sense of continuity implies a normal personality, or self-identity (Linde, 1993).

Each transcript was then read to understand a sense of self as indicated in personal disclosure, patterns of talk, and the use of pronouns (Denzin, 1989; Sandelowski, 1994).

This revealed the self as distinguishable from others (Linde, 1993).

Thematic analysis was done for discussion of the various episodes and the ways they were connected, the cultural values, and the narrator's claim for a particular identity (Mishler, 1986). The narrative was reviewed to extract cultural factors; such as, expectations of the group for behavioral patterns, scenario for life course, social meanings (Mandelbaum, 1982). Culture can influence how one views the extent of self; for example, cultures that believe in reincarnation (Linde, 1993). Described social patterns revealed roles, social acts, conflicts, solutions, and choices (Mandelbaum, 1982). The psychosocial aspects were obtained through data revealing emotional aspects, rewards, penalties, and outcomes of action (Mandelbaum, 1982; Mishler, 1986).

The next task was to decipher primary aims of the whole story, central figures, scenes, specific events and their relationships over time (Mishler, 1986). Boundaries, episodes, epiphanies, and turning points were identified. How these tied together and related were explained (Mishler, 1986; Sandelowski, 1994).

Overall structure and content sequence were evaluated for changes and aspects of acceptance and adaptation over the course of a participants' life. The overall structure

was also analyzed for story units, connectives, actions, and meanings. These helped to clarify how the story corresponded to the real world.

The researcher proceeded with this analysis using a Code Theme Form, as recommended by Miles and Huberman (1994). This form contained salient points, quotes, and notes on thematic aspects. Large margins were provided on the left side of each page of transcription. Each statement of the story was numbered for correct reference. Index cards (5x8) were used to begin development of codes. Initially, the cards were done for single summarizing. A set of colorcoded cards was used to identify descriptors or attributes of a class of phenomena. Codes included definition of a situation, ways of thinking about people, objects, and events. Codes and sets of cards were made for settings, activities, acts, meanings, and relationships. The codes were named semantically close to the terms they represented (Miles & Huberman, 1994). After the coding and card sorting took place, thematic units were developed.

After the initial level of coding, a pattern coding occurred. This coding process identified patterns, rules, explanations, relationships, metaphors, and emerging constructs. This process was repeated until pattern sets developed and themes or constructs emerged.

This conceptual coding of sets of empirical indicators was consistent with the concept indicator model defined by Strauss (1994). The actions and events described in the stories generated the underlying uniformity resulting in the coded categories.

The constant comparative analysis compared coded incidents to each other, compared new concepts, and compared concept to concept (Simmons, 1994). As a clear picture of relevant issues emerged, the coding became more selective, until core categories were identified. The categories helped to reveal the dominant processes in the narratives of the adolescents. The criteria for a category, identified by Strauss (1994) were as follows: (a) it was central to the analysis, accounting for a large portion of variation in patterns of behavior, (b) it appeared frequently in the data, (c) it readily related to other categories with connections being quick and abundant, (d) it had clear implications for a more general theory, (e) the core category moved the theory forward, and (f) it served as support for sub patterns and variation in the analysis which is hallmark to grounded theory (p.36).

CHAPTER IV

Presentation and Analysis of Findings Introduction

The purpose of this study was to describe the effects of exposure to violence in an inner city community on aspects of adolescents' identity development during this critical phase. The self narratives of adolescent participants produced data that were organized for analysis with an emphasis on preserving the originality and individuality of the participant.

The first part of the analysis presents demographic data. The sample is described and represented in tables. The types of exposures to violence experienced by the participants are presented, followed by the locations of exposures. Data provided on the age line form are as written by the participants.

The second part of the analysis discusses the narratives that describe the adolescents' perceptions of their experiences with community violence. Actual transcriptions of their stories are represented. The narrative analysis is organized according to the coded themes of distinguishing self from others, relationships, social patterns, community, conflict, and psychological aspects. Social patterns include fighting and robbery, drugs, shooting, and school.

The final part of the analysis presents the constant comparative method. The major categories that emerged are presented, and are compiled for reference in accompanying figures. The analysis concludes with an explanation of the predominate themes.

Description of Sample

Adolescent participants in this study volunteered through key informants in the community and through invitation of actual participants. A total of 14 male and female adolescents, ages 18 to 21, completed the demographic sheet (APPENDIX C).

Age

Table 1

Table 1 presents the ages of the participants. The mean age was 19.6 years with ages 19 and 21 having the highest frequencies.

Age of participants

Age	n	
18	3	21
19	5	36
20	1	7
21	5	36

Gender

The participants were closely distributed by gender. The distribution is shown in Table 2.

Table 2

Gender

Gender	<u>n</u>	95
Male	6	43
Female	8	57

Ethnic background

Table 3 presents the composition of the participants according to ethnicity. Participants selected from the following: Black, Asian, Hispanic, American Indian, Caucasian, other. Participants responding to the "other" category wrote in "mixed". The category "Black" represented the majority of participants. There were no responses to the categories of Caucasian, American Indian, or Asian.

Table 3

Ethnic Background

<u>n</u>	8	
11	79	
0	0	
1	7	
0	0	
0	0	
2	14	
	11 0 1 0 0	

Family size and members living in household

Participants were asked to indicate the size of their families inclusive of themselves. Table 4 shows a range from 2 to 10 members of the family. The distinction of members living in the household is indicated on Table 5.

Table 4
Family Size

Number of members	<u>n</u>	<u>&</u>
1	0	0
2	3	21
3	1	7
4	4	29
5	0	0
6	4	29
7	1	7
8	0	0
9	0	0
10	1	7

The most frequently occurring entries for family size were four and six members. Table 5 presents the relationships of persons living in the household. Six participants lived in single parent households, five lived with both parents.

Table 5
Relationships of persons living in household

Relationship	<u>n</u>
One parent	7
Mother	3
Father	1
Two parents	5
Stepparent	1
Sibling(s)	4
Grandparent(s)	1
Aunt(s)	1
Uncle(s)	0
Spouse	1
My child or children	6
Friend(s)	0
Significant other	0
Other (cousin)	1

Note. Some demographic sheets were incomplete.

Types of exposure to violence

The participants were asked to indicate the types of violence that they were exposed to during their adolescence and the number of occurrences. Some of the participants responded "too many to remember" and did not indicate a number. Others wrote "many" and "a lot". Table 6

demonstrates the type of violence and the number of participants that were exposed.

Table 6

Types of Exposure to Violence

Type of exposure	<u>n</u>	
Physical fight	13	
With weapon	4	
Without weapon	8	
Unknown	1	
Robbery	10	
With weapon	4	
Without weapon	1	
Unknown	5	
Rape	2	
With weapon	1	
Without weapon	0	
Unknown	1	
Murder	4	
Shooting	7	
Stabbing	6	
Drug deal	11	
Drive by shooting	3	

Note. Demographic sheets were incomplete. Some participants did not complete all sections.

Some participants indicated the number of times that each had been exposed to the noted exposure. The numbers are indicated according to what each participant volunteered.

Table 7

Number of Times Exposure Occurred Per Individual

Type of exposure	of exposure $X = \text{each participant response}$							
Physical fight		x	x		x			xx
Robbery		Х						xx
Rape								
Murder	x	XX						
Shooting	xx	X				х	×	
Stabbing	xx			ХХ	ХХ			
Drug deal			хx		х	х	×	
Drive by	X	X					<u> </u>	
No. of exposures	1	2	3	4	5	6	a lot	many

Two participants noted that they wanted to mention being threatened with violence. One of the participants stated that threats of violence occurred 8 times.

Location of exposure

Table 8 presents the locations of the exposures to violent events. The participants selected from the places named on the questionnaire.

Table 8

Locations of Exposure to Violence

Location	<u>n</u>	
School	10	
Near home	10	
Place of recreation	5	
Shopping place	6	
In home	6	
While visiting	6	
Near school	3	
Neighborhood	13	
Other	1	
(Out of town)		

Age Line

The Age Line (Appendix D) was offered to the participants as an aid to organize their story. The age line started at age 13 and ended at age 20. The participants were instructed to jot down the violent events within the appropriate year of age that an event occurred, and to include any events that they thought were significant in their adolescence. Eleven participants utilized the age line. The notations of the participants are organized by age, and are displayed as written on the form. There was not an age that was without exposure to violent events. The

participants did indicate a number of other specific events that impacted their adolescent years. Those events are marked with an asterisk. There were no positive events noted. A summary of these events is presented in Figure 1.

Age	Event *specific events other than exposure
13	robbery
	fight at camp
	saw stabbing at football game
	person shot near football practice school fights
	weed
	sex
	peer pressure*
	no love in house*
	1 st drive by
	chased by 4 boys
	boyfriend committed crime
	threatened in mall
14	man robbed at gunpoint stab my sister
	locked up a day
	moved out of home*
	lot of school fights
	fight at basketball game

Figure 1. Age Line

Age	Event *specific event other than exposure
14	friend fighting in street
	threatened in McDonald's
	fighting with weapon
	saw boy get shot
	father killed
15	experience how I didn't have friends*
	do not go to school*
	threatened by 3 boys
	almost in altercation in mall
	shooting at dance
	almost jumped
	shooting
	shooting at basketball court
	drug dealing
	girl threatened to beat me up
	threatened with a gun by ex-boyfriend
16	got pregnant 1 st time*
	wanted to have fun and did what I wanted to
	do*
	started smoking*
	cornered by janitor in elevator
	almost got in fight at basketball game
	saw person shot
	threatened at McDonald's
	boyfriend shot in arm
	threatened by a girl over rumors
Figure 1	Age line

Age	Event * specific event other than exposure
16	in argument, guy pulled out gun fight with brother-in-law
17	friend was raped and became pregnant girl fight had child* living with father of child, treated like trass threatened in mall boyfriend beat up fighting witnessed drug deals fight at school heard shots outside fights fighting
18	drugs fight with boyfriend second child* mom evicted* selling drugs getting into fights fight with mother robbery at mall threatened at concert fight with boyfriend drive by shooting

Figure 1. Age Line

Age	Event * specific event other than exposure
19	lived with male friend*
	fighting with male friend
	threatened in bar
	shooting outside concert
	threatened at concert
	fight with mother's boyfriend
	fight
20	threatened on campus
	threatened by female at college
	drugs
	girl stabbed in bathroom at school
	attempted rape and murder of myself

Figure 1. Age Line

Narrative Analysis

Upon completion of the demographic sheet and the age line, the participants were invited to begin their story.

The researcher invited the participant with an introduction based on recommendations of Riessman (1993):

Let's begin with your age line. Tell me a story about how these events influenced your becoming the person you are now. Tell me your story in your own words. Stories generally have a beginning, middle, and end. There is no right way or wrong way to tell a story. The story could tell how the exposures to violent events in

your community affected your self image, thoughts of right or wrong, feelings of security and safety, view of the future, and meanings of your experience and life. You might have your own story to tell. Take your time, and just say what comes to mind.

The participants were cooperative, and expressed a genuine interest in telling their story. After meeting the researcher, most of the participants expressed insecurities about how to get started and what they were to say. Once the introductory invitation was stated by the researcher, the participants were able to initiate and proceed with relative ease. When there was hesitancy, the participants used the completed age line to cue themselves as to what they wanted to say next. After the narratives were initiated, the role of the researcher was interacting by nodding, facial expressions, leaning forward, or by vocalizations to acknowledge the telling or to show understanding. There were only two narratives that where probing questions were needed. These same participants chose not to complete the age line, stating that they did not want to complete the age line because they could remember what they wanted to include in their story; however, they needed cues from the researcher.

The stories were audio-taped, and later transcribed into written text. The text was coded according to the

predetermined code themes (Appendix E). The narratives are grouped by these themes: distinguishing self from others, relationships, social patterns, conflict, transitions, turning points, cultural factors. These code themes served to organize the data from the narratives to discover descriptions of the effects of exposure to community violence on the aspects of the adolescents' development in the following ways: (a) what are the adolescents' experiences with exposure to violence, (b) what are the interpretations and meanings that adolescents ascribe to their exposure, and (c) how does exposure to violence affect self image, view of a just and benevolent world, value of human life, ideology of right and wrong, and thoughts of their future?

Additionally, the narratives were analyzed by noting abstract (A), orientation (O), narrative clause (NC), complicating action (CA), evaluation (E), resolution, and coda (C). These themes were taken from the works of Linde (1993), Riessman (1993), Cortazzi (1993) on interpreting data in narrative analysis.

The abstract (A) marks the beginning of the narrative. It can serve to summarize the story, to assist the listener to understand and evaluate what to anticipate or how to respond or understand the story. According to sources on analyzing narrative, an abstract is not always present. At

times the abstract has the purpose to help the teller negotiate whether or not to tell the story, or to determine if the story has relevance.

The orientation clause (0) sets up the story for the listener by describing the characters, time, place, and circumstances. These clauses can appear at the beginning or at different places in the story, and the presence and placing of these characterize a good story.

Narrative clauses (NC) support the framework of the story. They are generally in the past tense and tend to order the events. Complicating action clauses (CA), on the other hand, highlight specific actions that offer descriptive language that highlights the temporal aspects, emotive tones, or images of the settings or characters in the story.

The evaluation (E) is the story tellers' way of communicating the significance of the story of passage. According to Linde (1993), it is the "socially most important part of the narrative" in communicating the attitude and understanding that the teller desires from the listener.

The resolution (R) acts as an explanation or meaning that the teller ascribes to the story. This generally involves a proposition that needs to be proved, and is generally followed by supportive rationale (Linde, 1993).

The clauses may be present to resolve the ambivalence experienced by the protagonist (generally the teller) in the story. Both the evaluations and the resolutions convey the meanings ascribed by the teller to the experiences revealed in the story. These resolutions are significant to the making of our personal identity as we present it to the social world (Linde, 1993). The inner private self is brought forth and negotiated within the context of others.

The coda (C) marks the end of the story. It is not always present in the stories in this study.

The analysis revealed that the stories were more consistent of what Linde (1993) described as a chronicle. A chronicle consists of an ordering of events, a recounting of a sequence of events. It occurs in response to an established purpose, request, or demand. This is evidenced in this study since the participants are given the purpose of discussing their exposure to violent events. Compared to a story that would have one abstract and clauses that address the whole context of a story, Linde (1993) indicated that the chronicle does not have an abstract, orientation clause, coda, or conclusion. The stories in this study were chronicles; however they did reveal abstracts, orientation clauses, and codas that addressed each event.

Consistent with Linde (1993), the evaluation in the chronicle also followed each event, rather than one

evaluation for a sequence of events as a whole.

Additionally, a chronicle can have an evaluation at the end that serves to unify the narrative. It may also offer the teller's reasoning or structure of the story. It can be a summarization or an integration of a sequence of events.

Linde (1993) stated that the chronicle can "serve as a table of contents of potential narratives that would be told" (p.88). This is certainly evident in this study. There were many embedded narratives within the stories of the participants that could emerge as rich material for exploration.

Distinguishing self from others

Language facilitates and maintains major characteristics of self (Linde, 1993). The self stories establish a continuity of self through time, and the relation of the self to others. Stories also provide the platform to self reflect, to develop a sense of empathy and mutuality toward others. This serves also as a moral evaluation of the self.

During the developmental process, one discovers the uniqueness, the individuality, but concomitantly must develop an understanding of self in relation to others.

Autobiography addresses the value of differences, culture, and social order, and results in an authentic way of being that is comfortable for that person (Linde, 1993). There is

a continuity of self in normal personality that is achieved through a sense of history: the past is not only related to the present, but has relevance, as well. The process of telling one's own story helps to achieve this (Linde, 1993)

The following narrative demonstrates continuity with the past. The participant's goal is consistent with the interest in activity that was expressed in the past.

- P-11 (A) Ever since I was 2, I was drawing.
 - (NC) I knew I wanted to draw cartoons, do computer graphics.
 - (R) When I get my GED, that's what I want to go to school for
 - (C) Is computer graphics.

The story sequence continues to reveal the narrator's desire to distinguish self from others. During this process, the narrator shows an awareness of the effect that one person can have over another. The second sequence highlights the struggle of doing what needs to be done to become the desired self. The conflict is in the desire to be altruistic, while recognizing a need to further develop self efficacy. The resolution and coda indicate a resolution, and an attempt to recognize the brother as being separate and able to be his own self agent.

- (A) I found out that not any of the males in my family went straight through high school.
- (O) None of us got our high school diploma.

- (R) Now I am thinking of going to school to get my diploma to break this chain
- (NC) My brother dropped out of school, he's not doing nothin.
- (NC) He went there for a couple of days and stopped.
- (E) Sometimes I think it's my fault cause by me being older than him, he be looking up to me. I dropped out of school so I guess he dropped out of school.
- (R) He dropped out selling drugs, but he didn't drop out, he got put out. I really can't think about all that right now until I'm finished what I'm doin. There ain't so much that I can do for him.
- (C) When I'm done, I'll try to get him to finish what he needs to do.

The following sequences reveal a discontinuity in the ideology of right and wrong. In the first sequence, the protagonist in the story is relieved by not doing a wrong act. The second sequence reveals an ability to think about the future through a process of problem solving; however the coda expresses the discontinuity. The sense of what actions the protagonist might take under different circumstances are not known. The protagonist does not have an identity through time. Linde (1993) described this as a lack of a coherent self. As in the previous sequence, a lack of efficacy is consistent: "basically what kept me together was my mother."

(A) When my father died, that was the first

funeral I ever went to.

- (CA) When they told me it was over \$5., and I found out 2 days later who had done it, I was ready to kill somebody.
- (CA) Then a couple of days later I found out that the guy got shot, he got killed.
- (E) Basically I was happy, cause I was thinking if I had a gun or something, I would have done it myself. I am glad it didn't go like that.
- (O) Basically what kept me together was my mother.
- (NC) We kept in touch with her wherever we went.
- (CA) I think of the consequences. If I do this, what will happen, if I do this what will happen? If I do and if I don't how will it be?
- (C) I wouldn't want a gun put in my hands cause I don't know how it will be.

The self image resolves the question, "who am I?" One generally desires a good self, a self that is perceived by others to be good. There is an inner self that has vulnerabilities that cannot be expressed (Linde, 1993). These vulnerabilities need to be remedied so that one can present a self that is comparable to the external self that we observe of others. The reflexive self is that self that we present to others. It requires self regard and creation of values, judgments, and personal norms. Reflexivity is necessary to develop a moral sense (Linde, 1993).

The following sequences of narrative reveals the discontinuity of the participant's past with the present.

The protagonist expresses ambivalence about the past, and attempts resolution in the first sequence. It is as if the actions are bad, then the person is bad. The narrative captures the struggle for the desire to be perceived as good. Giving the evaluation or a meaning to the behaviors as "a real good time" is a way of negotiating the ambivalence. As the narrative continues in the next sequence, the abstract summarizes a distancing of the protagonist in the earlier sequence. The teller of the story is different than the protagonist in the first sequence.

The complicating action is one of "regret". Although the protagonist takes responsibility, the resolution and evaluation attempt to put distance between the past self and the future self, keeping one moment of time from touching another. Discontinuity and ambivalence are evident in the evaluation, creating an incongruity with the expression of regret.

- P-9 (A) I did the fighting, the cursing, the drinking, and the smoking.
 - (CA) It took a toll on me cause now I have a child.
 - (CA) I'm not with her father.
 - (CA) I don't have a place of my own.
 - (R) I'm not saying what I went through was bad,
 - (E) cause, I had a real good time doing some of those things.
 - (A) You see the type of person I am now, you'd never believe.

- (CA) I helped people get robbed.
- (CA) I been in fights. I stabbed a girl
- (CA) I regret some of these things, you know
- (R) I'm not gonna say some of those things I couldn't help, cause I coulda stopped it. It's in my past now.
- (E) Maybe later on I'll regret it, but not right now. Right now I don't feel bad about it, maybe I should, but I don't.
- (C) I just try to go on with my life.

As the chronicle continues in the next segment, the reflexive self begins to emerge in the story telling. A coherent system is being created. According to Linde (1993), a coherent system balances those beliefs that are assumed to be common to others, common sense, with those established by expert systems, like developmental theories. The coherent system of an individual is an opportunity to develop, understand, and evaluate one's own beliefs or exemplars (Linde, 1993). The protagonist is becoming the desired good self. In the first sequence, the narrative clauses recognize good in the self. The good self would correct the past "if I could go back." The last evaluation in the sequence attempts to create a change in that protagonist, who "had been in fights" and "stabbed a girl". The good self will "try to not show anger."

(A) I want to do something with my life right now. All the things that I did, all the things that I gone through, it's not good.

- (NC) One day I can kinda wake up and everything will be over with.
- (NC) I'm just gonna go to school.
- (NC) I made real good grades and things.
- (R) If I could go back to all those people that I hurt and apologize to them, I would.
- (R) If I could hug them and sit down and cry with them, I would.
- (E) Other than that I'm alright, I'm O.K.
- (E) I try not to show my own anger in the attitude I have.

The narrator offers an explanation for the past.

Meaning is given to the undesired behaviors of the past that supports the proposition that a good person has emerged. The meaning is external to the self, a necessity, as if the intentions and not the acts allow approbation: "I did things to make money".

- (A) All I wanted back then was money cause my mother didn't have any back home.
- (R) That's what I wanted, money
- (E) So, I did things to make money, basically, that's all.

The following sequences show a more confident and determined protagonist. The self agent has increasing efficacy having resolved the ambivalence.

- (A) I'm not going to be like her father and all those friends.
- (E) Because I feel like I have a lot going for

myself.

- (R) I know what college I want to go to and everything.
- (CA) I wanted to be a nurse.
- (NC) Now I want to have my own business, cleaning business, maintenance business, something.
- (R) I want to work with children
- (C) I think about that.
- (A) I ain't gonna let nobody hurt me as small as I am.
- (CA) I'm not gonna let nobody come up and hurt me.
- (R) I'm gonna protect myself the best way I can.
- (A) My main thing is I need permanent housing for me and my two kids.
- (CA) That's basically what I think about.
- (NC) Permanently, a 2 bedroom apartment or house.
- (R) I want to do something with my life. I want to be somebody.

The protagonist in the following narrative sequence recognizes a desire for the good self, but resolves the discontinuity by resolving that a good self would not fit into the cultural norm, "a way of life".

- P-6 (A) There's a side of me that you haven't seen.
 - (CA) I don't want to have a bad side.
 - (CA) I don't want to get angry.
 - (E) I'd probably be doing better. I'd probably be in college right now.
 - (E) So I guess I'm a bad person, cause of my aggression.

(R) Things I do, going out and smokin' and everything. It's a way of life.

The following narrative reveals a protagonist who has continuity. Goals for the future are evident. The experience of having friends die from violent events is integrated as a coping strategy, "I learned to expect things to happen", and as a part of the larger world, "There's so much that goes on"

- P-5 (A) I am going to college.
 - (NC) I want to buy property and continue my career in financing.
 - (NC) I also want to continue my music, write my music, dealing with music through musician stuff.
 - (R) I want to start a music company. I want to go to graduate school.
- P-5 (A) I'm not pessimistic, but I learned to like expect things to happen.
 - (R) I'm not surprised when it happens. I look at my friends as they are in a better place now.
 - (CA) It's pretty sad how they died,
 - (R) but I also have to continue my life also.
 - (CA) There's so much that goes on, the wars like Kosovo, famine, AIDS, and other diseases.
 - (R) I think about those things
 - (E) Education is important.

How does the adolescent develop a view of a just and benevolent world? How does the self distinguish itself from the larger culture?

The protagonist in the following narrative finds that others are not just. A strategy to maintain resilience is presented.

- P-10 (A) I have always been watchful.
 - (NC) I guess it got more so in junior high, observations.
 - (CA) Sometimes when I laugh it's like sarcastic anger.
 - (R) I have a responsibility to cope with these situations.
 - (E) I think other people get stressed out. They get mean and I have to deal with them.
 - (R) I have avenues to deal with things, like reading. I try to have a positive attitude.

Money reappears as ascribed meaning for violence in the following narrative. The protagonist is unprotected and vulnerable: "there's no place that's safe." The value of human life is reduced to money. The protagonist lives in a violent community where one has to be on their own to survive. There is hope that one day, "getting out of town"

- P-3 (A) I believe in good things. I don't look for fights.
 - (O) When I go out I just go out to play a little ball.
 - (CA) One person gets hurt and you try to get that person (speaking about retaliation).
 - (E) That's why I stay at my house or go to a friend's to play video games.
 - (O) I come home after school.
 - (CA) Once there was a drive by after school.

- (E) There's no place that's safe.
- (R) They should have more programs after school to keep people occupied. There's nothing to do.
- (O) I play sports. I play football.
- (E) I work hard not to be like everybody else.
- (NC) My parents helped. They taught me when I was little.
- (NC) I do jobs to make money, shovel snow, rake leaves.
- (E) It's basically about money (referring to the killing).
- (N) I try to so a little bit of everything for something to do.
- (C) I never been out of the city. It I get some money I might go out of town.

The universal adolescent experience is to understand one's sexuality. Even though the purpose of the chronicle was to discuss exposure to violence, the following participant offered a glimpse into the ways that adolescents challenge social norms while developing their own coherent systems.

- P-8 (A) In school, they would know exactly what hallway to go down and have sex.
 - (O) They would tell you, "If you go down this pathway and bear to the left, very secluded."
 - (NC) It wasn't hard to figure out.
 - (CA) I found out that the girls liked it as much as the guys. The girls would actually egg them on.
 - (E) There was no difference in sex or race, it was a game to them.

- (R) Personally for me, I thought I knew what it was and I liked it.
- (CA) Me and my girlfriend would get together with the fellows.
- (CA) We would have sex anywhere, it didn't matter.
- (C) It was something to do at the time.
- (O) I knew how to get around.
- (O) I got great determination
- (O) I knew how to take care of myself.
- (CA) My dad would say be in by 8 o'clock, but he would have to come get me.
- (CA) I was never on the way as I would tell him.
- (C) He would call and call and call.

Relationships

Our relationships offer opportunities to learn about ourselves, and how others view us. How others respond to us affects how and what we think of ourselves. The interpersonal experience plays a major role in self image. The following narratives have been categorized as those arising in or from relationships in the participants' families.

The first narrative is from a participant who was in foster care. The protagonist was adopted at the age of 7. The meaning ascribed for this was money. Human value and caring are not expressed. The adoption, even though it is by a relative, is seen as a transaction. Evaluating from the

perspective of violence, the transaction would be exploitation.

- P-11 (A) When I was 3, I was adopted. Lived in foster homes.
 - (O) I went from D.C. to VA and back.
 - (CA) My grandmother adopted me at the age of 7, basically for the money.
 - (CA) My grandmother didn't give me anything. Every 1st of the month she'd be looking for the check.
 - (E) She'd be looking for the money.
 - (C) My aunt was really taking care of us than my grandmother.

The next participant tells about violence that occurred in the home with the participant as a witness. The narrative is indirect with passive verb phrases. Rather than my father killed my cousin, it is "my cousin was killed", "or actually, I don't know". Distancing is evident in these passages. The sequence is told as someone else's story, the protagonist "never knew it".

- P-12 (A) There was a death in my family.
 - (CA) My little cousin was killed by my father or actually I don't know.
 - (CA) To this day I have fragments of knowing what happened.
 - (CA) I remember coming home from school and he was getting beat.
 - (CA) They said he collapsed, died right there, and I never knew it.
 - (O) This was when I was young and never

understood what happened.

(O) My mother already left.

The participant continues the sequence with telling about how his mother responded. Part of the self image is related to a cultural factor that prides lighter shades of skin and equates darker skin with failure: "you ain't gonna amount to anything cause you're so dark". The protagonist is the darkest of all the family. The coda indicates that those remarks were the most memorable of the relationship with the mother.

- (CA) Before she left she was saying negative comments toward me.
- (O) I'm the darkest out of my brothers in my family. My father, he's lighter than me. My mother's lighter than me.
- (CA) So my mom would say "You black bitch, you ain't gonna amount to anything cause you're so dark.
- (E) I was so young I thought she was playing.
- (C) But then we went to foster care, my father was busted, and my mother was nowhere to be found.

The sequence that continues describes the meaning given to the protagonist's experience with foster care. As in the first narrative mentioning adoption, this protagonist is also taken in by the grandmother, and the meaning is ascribed to money. A feeling of hurt is identified in the evaluation, and in the coda the protagonist bridges the past

into the present, and assumes ownership of the feeling: "I kept that in, and it's still in".

- (O) One of them (foster home) was good cause it was a church family.
- (O) Me and my older brother we was in one and like 2 blocks away was my 2 little brothers so we could go over there and see them.
- (CA) We had moved to MD and they were still in VA.
- (CA) Where I lived was more mental and emotional abuse than physical, there was physical too.
- (CA) So then my grandmother got us, and I thought she was being good.
- (CA) But I overheard them saying, "I'm glad we got the kids", so I was happy. Then they said, "Then we have more money to pay the mortgage"
- (E) It made me think they got me for the money, and so I was still hurt when I went to HS.
- (C) I kept that in, and it's still in.
- (A) I couldn't really live in that household.
- (O) I moved in with my father.
- (CA) There, my work was so far away, so I moved back with my grandmother.
- (CA) The same thing was going on.
- (CA) It got to the point that I started remembering things. It triggered things that happened in the family.
- (CA) My aunt said, "That's why your momma ain't watch for you."
- (CA) I didn't pay attention at first, but then my grandmother was telling me I should gotten an apartment.
- (CA) I told her I didn't cause she was sick.

Everything I do, they don't appreciate.

- (CA) There was a big fight and my little brother tried to calm me down. He told me it wasn't my fault, it was my aunt's fault.
- (R) My grandmother is an adult, and I'm a child. Most of the time an adult can be wrong too. But she didn't see it that way.
- (CA) She just told me to get out, and not come back.
- (C) I left. My little brother was mad.

There is a lack of benevolence and justice in the description of the protagonist's grandmother; however, the youth is able to experience support by the brother. The young person was blamed for the problems, and was asked to leave. The youth was able to resolve this by generalizing that adults "can be wrong too", and conclude that the grandmother and the protagonist see the issue differently. The sequence concludes with "I left", but the support of the brother went along with the protagonist.

The support of the little brother is meaningful to the protagonist. The protagonist expects to perform in a certain role due to the nature of the relationship, but experiences some role confusion.

(A) I have nobody to talk to, but I could talk to my little brother. The only time I really had a father was my brother. He was there for me.

(NC) If I was in a fight, he was in a fight. He was like my father for real.

- (NC) He calls to see how I'm doin, if I'm keepin' my head on straight.
- (CA) We had our altercations, but 5 minutes later, we always made a bond.
- (R) He's my guy. He'll always be my guy.
- (CA) My little brother gives me advice. He tells me to keep my head on straight.
- (NC) I say "I should be telling you that". He says, " No, you helped me when I was little, why can't I help you?" I say, " you can."
- (E) I'm stubborn. I try to do things on my own, but they try to help me.
- (CA) A switch of roles. He turned into my big brother, I turned little brother.
- (E) Every time I see him, he make me smile

The following story outlines the life that parallels the exposure to violence in the community. The protagonist is vulnerable, and is able to identify those risks of vulnerability. An attempt to change the environment did not change living conditions, but the protagonist is able to experience fun without the presence of the conflictual relationship.

- P-2 (A) I went through a lot, especially my mother. She was terrible.
 - (O) She was just a young mother. She had me when she was 16, and turned around and had my sister when she was 18, and then had my brother when I was 6.
 - (CA) It was hard on her having 3 kids, 3 different fathers, 2 bedroom, living in a dirty neighborhood around drugs, prostitutes, people killing each

other, robbing each other, stabs.

- (E) It was hard on her. She took her anger out on us.
- (CA) We went through the beatings and getting put out. Her not wanting to give us money, not wanting to feed us. A whole lot of stuff.
- (E) It made me depressed for a long time.
- (A) When I stopped living with my mother, I went through a whole lot. Fighting everyday. Getting put out for dumb things, fighting with my sister, my brother.
- (CA) They be stealing from me, don't have no furniture in the house, no food in the house.
- (E) It was hard being out on the street. It took me away from being at home. That made me feel a little better.
- (R) Cause I had more fun than living in that house with my mother.

The brothers are significant to the protagonist. The abstract conveys a sense of purpose and commitment. The siblings also play an important role in the protagonist's development of identity and self image.

- (A) I hung in there for my brothers and sisters. And watching my mother feeling bad.
- (CA) Feeling sorry for them.
- (E) It wasn't their fault.
- (R) I feel like if my mother can't do it, and there ain't nobody else in my family, I got to do something. Get out there.
- (E) I didn't want them to do the things I was doing. They didn't know the things that I was

doing, nobody did.

The following sequence tells of a relationship that was a support for the protagonist. There is also a glimpse into the confusion with the adolescent task of defining moral behavior. The narratives reveal the struggle to attain a sense of right and wrong when relationships are altered and impaired through addiction and violence. The protagonist is acculturated to violence as a resolution to conflict. There is enmeshment of community violence and domestic violence.

- (A) My dad's on drugs. My dad ain't never been around.
- (O) He wasn't really in my life.
- (CA) He been in and out of jail till I was 8.
- (O) I had a grandfather. He was in my life.
- (O) He bought me things. Took me out. Told me what to do, not to do, I ain't listen, but...

P-9

- (A) I had no love in my house.
- (CA) Everyone of my sisters, but me and the one that was 22, was trickin, shootin dope in the bathroom with needles. I mean all kinds of stuff.
- (CA) My brother died, my whole family just broke down.
- (O) I was 13.
- (O) He was a hustler. Some men owed him some money.
- (CA) He was coming to get his money. They went behind the car and shot him right through his jaw and right out the other side.

- (CA) He was driving himself to the hospital but didn't make it.
- (A) When I was 14, we had been in 4 shelters, this one was like transitional housing.
- (CA) My mother moved my sisters in, and I didn't like that cause all of them were on drugs, you know what I'm saying.
- (CA) My sister boyfriend, they went out and tried to car-jack somebody.
- (O) This is on Christmas Day.
- (O) He was trying to call my sister, but I was on the phone taking care of past bills, buy food and stuff. I was 14, for all these women. I had a summer job.
- (CA) My sister smacked the phone right out of my ear. I couldn't see, my eye was all blurry and watering.
- (CA) We was fighting, I caught a ketchup bottle on the head, the glass one. I ran next door and got a knife and stabbed her 9 times in one spot and 6 times in another.
- (O) She didn't die or nothing.
- (CA) I was locked up for a day. My sister, who was 22, and came and got me.
- (R) I had to move out of there.

Although the participant offering the following sequence was in foster care, the relationship with the protagonist's mother remained significant. The influence of that relationship contributed to the continuity of the integrity of the protagonist's identity and role relationship to the sibling.

- P-11 (A) My mother told me to follow my first instinct. Basically, the $1^{\rm st}$ thing I think about, I about my mother.
 - (E) That's what got me through.
 - (CA) If I had been a bad influence on my brother, both of us would've ended up the same way. Locked up, both of us locked up.
 - (NC) Since we been together most of our life, what happens to him happens to me.
 - (NC) My aunt helped me to keep my relationship with my mom because she let us go see my mom.
 - (R) Basically what kept me together was my mother. We kept in touch with her everywhere we went.

The participants in the following narrative did not perceive any help available to them. The first sequence expresses a different perception than in the previous narrative, and a lack of resolution with the relationship. The second sequence tells how the one person that was available saw the protagonist as not needing help, but saw that the siblings needed clothing. The abstract suggests a need for caring or emotional support. The protagonist identified a role of caring for siblings, but the role was also one of responsibility to supply material needs. The material needs that the protagonist views as a duty are very basic with priority to first provide food for the siblings.

- P-12 (A) I still get mad that my mom wasn't there for me. I love her, but I hate her.
 - (CA) When I went down to South Carolina, she introduced me as her long lost cousin.

- (CA) I would tell people she was my mother, and when they would check, she'd tell them I was her cousin.
- (E) That really hurt me. I don't understand why she was never a mother to me.
- (R) I guess she wasn't old enough to figure it out. The things I didn't understand, I still don't understand. I want to learn, but I want to leave it alone to avoid controversy.
- P-2 (A) Nobody seemed to notice what I went through.

 That's why I think nobody cared about me.
 - (CA) They only say smart things like "Get your grown ass in the house, stuff like that." Instead of being like "I know you are going through rough things, let me do this for you."
 - (CA) They were always throwing up the negative things, instead of trying to help me. They was forever, "It ain't my child."
 - (NC) Except for my grandmother, but there wasn't anything she could do cause she didn't live around there. She would come sometimes, take us shopping. She'd take my brother and sister because she knew I had stuff. She'd say, "Your little grown ass got shit, you don't need nothin'." So she'd take my brother and sister shopping.
 - (NC) When I could I would. Most of the money I was getting went for food. The thing I'd buy was food. Or my sisters socks and drawers or things for her hair, deodorant, stuff like that. I got my brother shoes cause I had to keep him. He's a boy, shoes, his feet got big. His shoes got too expensive.

Social Patterns

Incidents of violence as told in the following narratives are grouped according to types of exposure: fighting and robbery, drugs, and shooting. They are also organized according to the settings of school and community.

Fighting and robbery

The first narrative offers the participant's meaning given to robbery. The explanation seems to confuse the protagonist, who expresses that "they just want to be reimbursed," and resolves that the rationale could be fair. When the protagonist explains "they don't want to feel what they did," the empathy in that statement indicates a desire for the good self, to not feel bad or be bad, like the deed itself. The protagonist attempts distancing, "I'm not sayin' I go out and do that", and "They shouldn't do that."

- P-11 {A} People from my neighborhood do bad things for self improvement.
 - (CA) Somebody robs you, "Shit I'm gonna go rob somebody else." See what I'm sayin',
 - (NC) It's like bringing it back to you, well, you like, "I'll just rob somebody."
 - (NC) I'm not sayin' I go out and do that, but that's why people do it, being protected.
 - (CA) They don't want to feel what they did, they

just want to be reimbursed.

- (R) Like, I guess that could be fair.
- (E) They shouldn't do that, but that's what they think.

The next participant continues the theme of robbery in the second sequence. The first sequence underscores the fear of personal harm, as well. The resolution indicates insecurity about the future, and in the evaluation a sense of helplessness is conveyed in "nothin else you can do about it." The protagonist does not have a secure sense of personal safety, which is repeated again in the second sequence, "I don't think about how long I'll live." This statement is dismissed with "I don't even worry about it."

- P-3 (A) Sometimes I get afraid, like when I walk home and it's dark.
 - (NC) I always watch what's behind me an in front of me.
 - (NC) That's what I pay attention to.
 - (R) I want to get home safe. I'm hoping it will stay that way.
 - (E) Can't trust people, you can't trust. Nothin' else you can do about it.
 - (A) Kids don't have much and when they get older, they want things.
 - (O) They think about other people's things.
 - (R) I don't think about how long I'll live. I don't even worry about it.
 - (CA) Kids fight all the time, even about clothes.

The possibility of being a victim of violence is restricting. Other persons' things are intimated to have more value than human well-being or life. The narrator offers two resolutions to avoid harm.

- (R) Don't buy anything good, like boots.
- (C) Some guy shot my friend for his boots.
- (E) There's all this violence cause people want to fight.
- (CA) They want something, they'll stab you.
- (R) I just stay in the house.
- (CA) Like when my cousin goes out of his house, something happens, he's dead.
- (CA) They said somebody robbed a bank, but he didn't know nothin' about that.
- (C) He was just walking.

The next participant also thinks that fighting occurs over clothing. Thoughts of the future help this protagonist avoid fighting behaviors.

- P-12 (A) I just try to look for the future. I could get into arguments, but I won't fight.
 - (CA) You can fight over the clothes you wear, if it's not certain name brands.
 - (R) I think, if I follow this path I could end up like that, or if I take a U-turn that could get me success.

The following offers a summary of the social patterns of the community. Exposure to this type of violence is frequent. Money is repeated as the ascribed cause or the purpose of this type of violent behavior.

- P-11 (A) We saw people getting jumped everyday over some money.
 - (O) Basically, everybody on the street was hustlin'.
 - (E) That's how the environment was.

Drugs

This grouping of narratives describes the pervasiveness of violence in the lives of these inner city youth. The second sequence tells about the protagonist reaching a turning point at age 16: a summer job replaced selling drugs as a way of getting money.

- P-11 (A) My grandmother was selling drugs. She's 70 some years old, selling drugs from the house.
 - (O) My cousin was sellin' drugs, my aunt was on drugs and she was pregnant.
 - (0) We got our checks on the 31st of the month, we'd ask for some dollars, she'd say no.
 - (CA) When I was 14, I started hustlin' for me and my brother.
 - (CA) She wasn't giving us money.
 - (CA) Started selling drugs for money till I turned 15.
 - (R) I got a summer job.

The participant's brother did not change. As was described in other narratives, there is a pattern of giving up, putting the young person out of the house when conflict arises.

P-11 (A) My brother was in junior high when he started

smoking (marijuana), but he had stopped in the 9^{th} grade.

- (O) So after my brother started smoking, he started coming in the house late, even though my mother gave him a curfew.
- (O) He wasn't listening.
- (CA) She decided to get him put on probation.
- (CA) By the time he was 17 to 18, he was smoking.
- (CA) He wasn't going to court when he was supposed to, so by the time he turned 18, my mother put him out.
- (C) Now he's still out there, doin' the same thing.

The next narrative ascribes the use of substances to availability. The idea that adults or those in authority don't care is repeated.

- P-8 (A) There is so much available to you growing up here.
 - (CA) I had alcohol available to me. I could go into a store and buy stuff.
 - (CA) They didn't care, they didn't ask questions.
 - (O) I used to get into the clubs when I was 13, 14.
 - (E) They didn't care, the bouncers would be like, "Come on in, have a good time."

Shooting

The significance of clothing for the adolescent is captured in the next narrative. The protagonist describes a state of confusion about valuing the jeans over life. The

narrator ascribes this disturbed sense of values to "livin' in the ghetto."

- P-2 (A) The first time seeing a drive by shooting, I was in my aunt's neighborhood.
 - (O) I was about 13. We were going to a friend's birthday party.
 - (NC) I had on a brand new pair of striped jeans. I was doing it up. I was looking good.
 - (NC) I was excited. I had on new jeans, and the people I was going with had none.
 - (CA) We was about to get into the cab. My neighbor's sister's boyfriend was in a real bad mood.
 - (CA) He was mad cause she was going to the party. There was a dude that wanted to talk with her and pulled into the driveway.
 - (CA) Her boyfriend just started blastin', blastin', blastin'.
 - (CA) I was like, "Man, what are we going to do?"
 - (CA) I was scared. I messed up my jeans.
 - (E) I wasn't mad that he was blastin' us, I was mad that I messed up my jeans. That's how messed up I was. Livin' in the streets, livin' in the ghetto just took over me. Trippin' over a pair of jeans when someone almost blasted my head off.

Clothing emerges again in the following narrative as a rationale for shootings. The narrative clause indicates that this protagonist, as the others, restricts types of clothing to prevent victimization.

P-6 (O) I was in middle school and we seen 2 kids runnin' through the hall and everything.

- (CA) All of a sudden we hear gunfire.
- (CA) Kid got shot for \$300. Worth of leather coat, he shouldn't even have been wearing in school.
- (CA) Got shot right through the coat.
- (E) So if you want somebody's coat, why would you, know what I'm sayin'?

The next narrative is from a participant who witnessed a shooting of a family member. Although feelings are acknowledged, the resolution and evaluation are impersonal. The participant's story that follows has more personal meaning, and the effects of the exposure are much more descriptive. The repetitions in the second narrative give the impression that the teller is working through actualizing this experience as it is being told.

- P-4 (A) It affected me when I saw my uncle get shot.
 - (O) He was a drug dealer. He got shot.
 - (O) We was all outside, and they just come up in the car and shoot him.
 - (NC) We were crying and all that, but we never knew he was a drug dealer. Till that.
 - (CA) It affected my family life.
 - (CA) My family stopped talking to each other. They talk to each other now, but
 - (R) It's the drugs, I just don't know why people need to sell drugs to each other.
 - (E) They don't know how to use it.
- P-9 (A) I have seen a lot between 13 and 18.
 - (O) A lot of things.
 - (O) I seen drive by shootings, people who got

shot, standing right beside me.

- (CA) You know, just stand there, drop dead, I mean dead, immediately dead.
- (NC) I was thinking, "I'm glad it wasn't me."
- (R) I am sorry I have to stand next to somebody I thought was my friend, that I think was my friend, that just died just like that.
- (CA) Just shot in the head, drops and dies.
- (CA) I'm just going crazy. I didn't know what to do, to see if they were living or run, or duck, or call for someone. I wanted to see what was wrong, they was dead immediately.
- (C) A friend of mine, a male friend of mine, I used to live with...

The final narrative gives a description of the nature of witnessing a shooting. The story is descriptive in detail: "hot day", "4th of July", "looking out the window." The protagonist has remembered the details vividly. "Ain't seen nothin' like that" was the teller's way of expressing the shocking nature of the event. The coda tells of the outcome from another's perspective, leaving the listener wondering what the protagonist experienced next. The listener has a glimpse of the real life traumatic experience of the protagonist, but does not learn what it means to the protagonist.

- P-11 (A) I was about 14 and this dude that I knew shot a college kid.
 - (O) I was in the basement. It was a hot day on the 4^{th} of July.

- (CA) I was just looking out the window when the gunshot went off.
- (CA) My cousin was out there and when the guy came out of the building, he went right past my cousin. Ain't seen nothing like that.
- (CA) He had a gun under his coat and when he walked past, he shot him down dead.
- (CA) His brains were on the sidewalk.
- (C) That's what made my grandmother move.

School

The fear of violence for the next participant has affected normal school life activities. The protagonist avoids social activities that are usually associated with the adolescent phase of development. This avoidance is not due to internal emotional or psychological factors, but is a direct response to the fear of actual harm from gun shots.

- P-4 (A) You hear about people getting shot by being in the wrong place. I don't want that to happen.
 - (CA) I don't go to my school dances, none of them, cause you know, I heard some of those things on the news.
 - (R) I just don't go to none of those dances, cause you know, they be getting mad if someone dance with their girl or something like that. Just pull out you know.
 - (C) I wish the schools had metal detectors, but they don't ever know who's got a gun on them or not.

Avoidance is repeated, "That's why I don't go outside", "That's why I don't play basketball ...". Fear of harm alters usual leisure activities.

- P-3 (O) I was at the basketball court.
 - (CA) The shooters could have come to me and I would have died you know.
 - (O) It's like when people shoot from a car in a drive by.
 - (O) They'll shoot anywhere.
 - (R) That's why I don't go outside.
- P-12 (A) One of my friends got killed over a basketball game.
 - (CA) They think: "He's better than me, so maybe if I take him off this earth," right there at the basketball game.
 - (R) That's why I don't play basketball on the street no more. I be thinking, "What if I get the best of this and they be jealous and try to get out a gun and shoot me or something?" That's why I'm skeptical of where I go.
 - (C) There's elbowing and bumping, it's all in the game, but some people bring it to another level.

The avoidance of activities affected school attendance, and after school activities. The following narratives are exemplars.

- P-9 (A) There was so much hate in school, everybody hatin'.
 - (CA) I fight, then I got pregnant.
 - (C) I just dropped out.

- P-11 (O) I played football, so I was coming home late.
 - (CA) This man came up and asked me if I had a match.
 - (CA) As soon as I gave him the match, he pulled a gun and opened fire.
 - (CA) I'm right there in the midst of it, so I froze.
 - (O) I was like, "get out", to myself.
 - (R) Luckily, I wasn't hit.
- P-3 (O) I come home after school.
 - (CA) Once there was a drive by after school.
 - (R) There's no place that's safe.
 - (E) They should have more programs after school to keep people occupied. There's nothing to do.

Community

Discussion of the community was included in many of the stories. The descriptions in the following narratives expound the extent of the exposure to community violence.

- P-2 (A) Nothing good happened in our neighborhood.
 - (CA) Nothing good, always something bad.
 - (R) I wish my father was around, and we didn't live in the neighborhood we did.
 - (E) That would have made a big difference, a big difference.
- P-2 (A) Living in ____ was the hardest cause that's where I got involved with the shooting and the stabbing.
 - (CA) Oh my goodness, I watched so many girls get G'd, set up girls, and all that just to get money from the dude that's doin' to them and all that.
 - (E) Man, I mean I hurt those girls.

- P-4 (A) I don't go outside. If, I go outside, I'm in the house by 9 cause I don't want to see those crimes.
 - (R) I don't want my daughter, cause she jumps, I don't want her to jump to those noises.
 - (CA) The crack heads and all that stuff.
 - (R) I don't like seeing those.
 - (E) It ain't really affected me though. I just be rush' home from school.
 - (C) I rather not think about it.
- P-1 (A) It was around this time that the movie "Boys in the Hood" had just come out. In the movie they show a drive by shooting.
 - (CA) Every time I would sit on the porch with these people and a car would go by real slow, I always thought someone was going to shoot us.
 - (R) So I don't like to stay outside anymore.
 - (E) It just made me wary when I was in that neighborhood.
- P-3 (A) I don't walk around my neighborhood.
 - (O) I know most of the people around. They watched me grow up, so they make sure I'm O.K.
 - (NC) I hang out with other people.
 - (CA) I don't have no friends around here. I got friends in other places.
 - (E) I'm afraid. I associate with some of the boys around here, but I don't trust them.
 - (R) I'd like to walk the streets safe. I'd like to hang out places, like in front of my house or anywhere else, not to have to worry about people shooting you. Hang out in front of my house, walk

down the street around the neighborhood, go play, and have fun.

- (E) I wouldn't be thinking about being alive. All the violence and people killing each other in the world. I wouldn't even been thinking about that.
- P-11 (A) Somebody was killed across the street from us.
 - (CA) Whoever, they say the person that shot the dude across the street, walked along side our building, and shot the man through his window across his balcony.
 - (O) So we went outside, the ambulance was outside. We watched.
 - (CA) There were some kids home and they went crazy cause their uncle and father just got shot.
 - (CA) They were mad because the news casters were outside. So one dude came over and hit the newscaster dude, and he ran cause the police chased them after that happened.
 - (C) When we went in the house, my mother got on the phone, called my stepfather and told him she was ready to move.

Part of the efforts to decrease violence in the community has been to increase the numbers of police officers on the street. It is hoped that members of the community can rely on the officers as a resource and for assurance of safety. The next sequence of narratives present the perceptions that the young people have with regard to police officers.

P-7 (A) I have a lot of difficulty with trust. It

- affects my trust of men, but the women cops, it upsets me.
- (CA) When I went to file the restraining order, the woman there was talking to me about, "don't do anything to instigate it."
- (E) It was a female officer, and I found it so frustrating.
- P-6 (A) I was in K-Mart. I bought some cigars. I was walking out the store, and a police officer stopped me and said, "Did you purchase those items?"
 - (CA) He tells me to go back to the cash register. I'm talking to the lady and he started talking junk in my ear. So I pulled out my receipt and showed it to him.
 - (CA) He says, "What do you think, I'm some bitch or something? You're not going to just throw this in my face." That's when he pushed me, maced me, put me on the ground, handcuffed me. He threw me on some boxes, hit my head on the glass window, and then took me out to his car. Told me, I was lucky I was at K-Mart cause he woulda killed my ass.
- P-5 (A) That's not the first incident I had with police officers. When I was visiting my friend, we went to play basketball.
 - (O) We were coming home at like 11:30. We were walking through like a shopping center, like a plaza.
 - (CA) A police officer said, "Can we talk to you for a minute?" And we were like, "we don't have anything to hide, you can talk to us."

- (CA) Then they were like, "Do you mind if we search you guys?" We were cooperative. One of the officers was searching my friend, he had like army fatigues outfit. It had many pockets, a lot of pockets.
- (CA) When he was going through the pockets, he was like, "Do you have any weapons?"
- (NC) My friends were like, "No we are not carrying any weapons."
- (CA) They started asking the same questions over and over.
- (R) So basically, I really don't trust police officers.

Conflict

The exposure to violence and the use of violence as a solution to problem situations have created a conflict in the determination of right and wrong during the adolescent period. The first excerpt consists of a response of retaliation in defense of the protagonist's mother, but ascribed this reaction to "too much stuff for me to handle."

- P-12 (A) There was this one incident. There was a young man he said something about my mother.
 - (CA) So I had all these things, the passing of my grandfather, and what was going on at home was on my mind. There was too much stuff for me to handle.
 - (CA) He said something and I was a time bomb waiting to explode when he said.
 - (CA) I exploded and put my rage out on him.
 - (CA) I was charged with simple assault, but I

didn't get convicted. The case was dropped. They gave me a year's probation.

- (CA) I went through a year of anger management.
- (E) It really didn't do anything cause I still got into fights.
- P-1 (O) I was standing in the mall, this happened a lot.
 - (CA) My friends and I would be in the mall and girls would just come up and try to fight us for no good reason.
 - (O) I never got into a fight in the mall.
 - (C) It was just stupid things, like they would call us names.

The participant offering the next story is confused about violence when there is no conflict. "They jumped me for nothing, absolutely nothing." This suggests that a known reason or purpose would legitimize the behavior. "I think about it all the time, absolutely nothing."

- P-9 (A) I got into a fight when I was 18.
 - (CA) These girls I thought were friends, they jumped me for nothing, absolutely nothing.
 - (O) I had just met this man.
 - (CA) One of the girls' boyfriends jumped in to.
 - (CA) So he stabbed him, almost killed him, but he lived.
 - (C) I think about that all the time, absolutely for nothing.

The conflict in the next narrative arises within the primary relationships of the protagonist. The protagonist tries to resolve the issue with the possibility that the grandmother could be wrong. When that explanation does not work, the protagonist uses self blame to rectify this situation and other conflicts within the relationship.

- P-11 (A) My grandmother kept asking me for money. I gave it to her, but I just got to the point of saying, "Why do I have to give you money? You get our check for foster children." She was like," I have expenses."
 - (CA) There was a big argument. My brother tried to calm me down and tell me that it was not my fault, it was my aunt's fault.
 - (R) My grandmother is an adult and I'm a child. Most of the time an adult can be wrong too.
 - (CA) But she didn't see it this way. She just told me to get out and not come back.
 - (CA) I left. My little brother was mad.
 - (E) I always blame myself. That's why I am not with my mother, and stuff. That's what I get for my outburst. That's what I get. That's why I got put out.

The boyfriend of the protagonist in the next story stabbed someone, yet the protagonist did not acknowledge or confirm that, "I just kinda knew." The conflict in this situation appears in the complicating action, "oh no".

The protagonist resolved the conflict by relying on, "I wasn't worried about it, like he was going to hurt me ... I was just like, Oh".

- P-1 (A) My friend lived in kind of a bad neighborhood, but she was a really good friend of mine so I used to hang out there a lot. She knew a bunch of people that were kind of in a gang. One of the guys was kind of my boyfriend.
 - (O) We were standing outside and we were just sitting, talking, or whatever.
 - (CA) Some guy came up to him and whispered something like "F" you. Then he (boyfriend) said he'd be right

back and he walked down the street.

- (O) He was gone like 10 to 15 minutes and then we saw an ambulance go by.
- (CA) Someone came running, saying that someone got stabbed down the street.
- (CA) My boyfriend came back and I was like, oh no.
- (R) I just kinda knew that he did it. I didn't ask him, I just kinda knew.
- (E) So that just kinda bothered me. I wasn't worried about it, like he was going to hurt me or anything. I was just like, "Oh!"

Psychological aspects

Emotional states were clearly expressed in the stories. Although feelings were mentioned in the other groupings of narratives, the following data offer clear relationships between feelings and exposure to violence. The first

narrative mentions feelings directly, but helplessness is indirectly expressed as well.

- P-10 (A) The violence makes me sad somewhat. Seeing so much of it out there.
 - (CA) Drugs. A lot of people I know are suffering.
 - (CA) I wish I could do something to help them.
 - (E) Sometimes people get high to keep from being angry.
- P-4 (A) I worry.
 - (CA) You never know if they pull the trigger on you and you will die.
 - (C) I think about that a lot.
- P-9 (A) All the time I found myself telling myself I wish I was dead and all that.
 - (CA) I thought of it, but I never tried it. I come home in the room or something and say, "I should take this knife and stuff it in my throat."
 - (C) But I never did it. I just thought of it. I never did it.
- P-11 (A) I went to junior high school, got into fightswas suspended for 25 days. My father lived with my grandmother, but was locked up off and on.
 - (CA) We stayed over my aunt's house for a week. When we got back, we couldn't find my father.
 - (CA) A day later I walked to the store with my grandmother. She told me that my father was killed over \$5.00.
 - (CA) Me and my brother went crazy. Stopped listening to my grandmother. Fight almost every week in school.

- (E) Really I think that's all we wanted after our father died, we really wanted our mother.
- P-3 (A) Sometimes I get afraid.
 - (0) Like when I walk home and it's dark.
 - (CA) I always watch what's behind me and in front of me.
 - (R) I want to get home safe. I'm hoping it will stay that way.
- P-6 (A) I'm ready for I guess the biggest trial in my life. I guess I mean I don't know, maybe the world is goin' to end.
 - (CA) I just get sick and tired of going through all these trials though.
 - (E) I shouldn't have to. Just like with the cop. No need for him to stop me at the K-Mart. So I mean, just the things that you go through. I guess it's making me stronger.

Constant Comparative Method Analysis

The process of narrative analysis required that each story was read and reread several times. During the readings, repetitive patterns and themes began to become clear to the researcher. Those patterns and themes were noted and reviewed multiple times. When satisfied that there was satisfactory immersion in the data, the similarities and repetitive patterns were written verbatim on index cards.

Colored index cards were selected and labeled according to the research questions: meanings of violence, meanings of exposure, self image, right and wrong, cultural factors,

thoughts of the future, value of human life, view of a just and benevolent world. This process provided organization and structure to assist with maintaining a focus amidst the data. A doctorally prepared nurse assisted in grouping the verbatim statements to assure appropriateness and validity since this step begins the process of the researcher "translating" the stories of the participants.

The next step was to find similarities within each group. The similarities were developed into categories named by the researcher. The doctorally prepared nurse was consulted to assure accurate representation of the participants' words.

Meanings for the acts of violence

Figure 2 serves as a visual summary for the patterns of meanings for the acts of violence in the community that emerged from the data. A discussion of these patterns follows.

Drugs

Money

Clothing

Competition

Anger

Impulsivity

Figure 2. Meanings for the acts of violence categories

The participants ascribed drugs as a cause for violence. Statements supporting this are, as follows: "they're on weed and stuff", "people steal for it (dope)", "it's the drugs".

Money was another frequently named cause for violence. Exemplars are: "they'll shoot anybody for money", "I did things to make money, that's all", "it was a way to make money".

A desire for clothing was perceived as a reason for acts of violence. Excerpts of the narratives that support this are "... shot my friend for his boots", "people wanted to jump us for the clothes we had", "around here they'll kill somebody for coat and shoes, anything".

Competition was another frequent category that emerges as an explanation for violence. Some of the statements are "a lot of times they fight just to prove things", "one of my friends got killed over a basketball game", "get back at that person".

Violence was perceived as a way for people to express their anger. Fighting was mentioned: "most of the violence is from fighting", "people want to fight". Other perceptions of anger were: "I think other people get stressed out, they get mean", "kids have a lot of anger cause of their parents".

Impulsivity was a category named for the explanations of why there is violence. Statements that fell into this category are: "a lot of times it's just stupid things", "people don't think before they pull the trigger", He started shooting for nothing, absolutely nothing", "they jumped me for nothing, absolutely nothing".

The effects of exposure to violence

The effects of exposure to community violence are presented with examples from the narratives. A summary of the patterns are pictured in Figure 3.

Confusion

Avoidance

Disbelief

Fear

Desensitization

School

Vulnerable

Sadness

Excessive

Emotional distress

Figure 3. Effects of exposure to violence categories

Confusion was expressed in response to exposures to violence. Repetitive responses were: "I don't understand, I don't understand", "I think, how could they do that", "I don't know what to do, to see if they living, or run, or duck, or call for someone".

Avoidance was named as a category for the statements that indicated change in routines. Avoidance of going outside was expressed repeatedly: "I don't go outside", "I don't like to go outside", "I used to play outside, I don't do that anymore", "I don't go outside much", "I just don't

go outside". Other statements were: "That's why I don't play basketball anymore", "It seems like I have had no fun".

When telling the stories about their exposures, there was a pattern of disbelief. "I can't believe it happened to me". "You don't expect it", and "just unbelievable". "I can't believe people are so stupid", an "just mind boggling".

Fear was experienced as a result of exposure to violent events. "I was just more scared than anything". "It just made me more wary". "I was scared". "Sometimes I get afraid". Fear was also expressed indirectly: " It's like I be thinking they gonna rob me for some money", and "I think about it every time I look in the newspaper".

Some of the participants made statements that were consistent with being desensitized to the violence. "I'm not surprised when it happens". "This hasn't changed me much, I've been exposed to a lot". "I expect anything".

"Just kinda bothered me".

The exposure to violence affected school attendance and school work. "It affected my school work, I got bad grades". "It was hard to concentrate in school". "I used to get up in the morning and didn't want to go to school".

Participants expressed a sense of vulnerability as a result of their exposures. "I have to move away from this

neighborhood". "There were bad things happening around me".
"There's no place that's safe". "I don't feel safe in the
apartment". "I don't want to see those crimes".

Sadness was expressed directly: "The violence makes me sad somewhat", and "It's pretty sad how they died". Sadness was expressed in other ways: "I actually started crying cause I thought I had lost another friend", and "I felt sorry".

The participants expressed the perception that the exposures to violence were excessive. Excessiveness was experienced in both aggregate and description: "Wherever you go, it's violence", "I shouldn't ever have seen things", "Seeing so much of it out there", "I witnessed a whole lot", A lot of things". The participants expressed the inappropriateness of the exposures: "What kind of stuff is that for kids?" Violent events that were witnessed varied: "I witnessed people getting robbed, shot, stabbed, jumped", "just shot in head, just drops and dies", "I'm sorry I had to stand next to somebody, I thought was my friend, that just died like that", "I've seen drive-by shootings. People got shot standing right beside me, could've been me". Exposures took place over an extended period of time: "My first time seeing a drive-by shooting, I was in my aunt's neighborhood. I was 13", "I've seen a lot between 13 and 19".

The narratives disclosed emotional distress. Some of the patterns clearly expressed the distress: "Too much stuff I could handle", "It was rough", "It took a toll on me", "It's a struggle everyday", "It's just real hard, real hard", "It's hard out there". Statements were personal: "I was so hurt", "It made me feel terrible", "It was really awful", "I was distraught". The distress was pervasive: "I rather not think about it", "It's a lot of things", "I think about those things", "I think about that all the time".

How exposure to violence affected the self identity

The narratives were examined for the effects that exposure to violence had on self identity. The patterns that emerged as discussed with details from the participants' stories. A summary is presented in Figure 4.

Distrustful

Tired

Defended

Aggressive

Determination

Helpless

Detached

Disequilibrium

Figure 4. Self identity categories

The participants made statements that clearly indicate a lack of trust in others: "I don't trust nobody", "I have a lot of difficulty with trust". Other statements were less direct, but expressing distrust: "I'm safe if I stay home, I don't like to be paranoid", "I'm not pessimistic, but I learned to expect things to happen", "I have always been watchful", "I usually feel on guard, easily get put off, and not trusting".

The narratives described the protagonists as being tired, exhausted by the amount of violence in their community: "All those things I did, all those things I gone through, it not good", "I got tired of the environment". The

participants acknowledged that their experiences were extraordinary: "I been through a lot", "I went through a lot", "I don't want to think about this stuff", "One day I can kinda wake up and everything will be over with". The strain affected their ability to attend school: "I just got tired of all that so I stopped going to school when I was in the 10th grade", "I got tired of being around those kids", "I didn't go to school really".

Exhaustion did not affect the participant's mindfulness to be ready to defend themselves: "I don't take a lot of crap from nobody". Participants saw themselves as capable of self protection: "I ain't gonna let nobody hurt me, as small as I am", "I'm not gonna let nobody come up and hurt me", "I'm gonna protect myself the best way I can".

The participants thought of themselves as being overly engaged in fighting. The need to fight was ascribed to their exposure to violence: "I don't like to fight, but if it boils down to that then I'm going to have to fight", "I used to hang out with people, they would get into fights with other neighborhoods". Some saw the fighting as part of their nature: "Fights, fights, fights, that's basically how I lived", "I've been involved in so many fights, so many fights", "I kept getting into fights". Others tried to avoid the fighting: "I try to avoid fighting", "I believe in good

things, I don't look for fights", "I don't want to be angry".

The participants ascribed the feelings of anger and fighting behaviors as affecting relationships: "I carried all this anger into school", "I used to storm out of the house and be mad", "I couldn't really get along with people". The fighting became a part of identity: "I was like a time-bomb waiting to explode", and "I guess I'm a bad person cause of my aggression".

Against the odds, these participants want to have a good self. The narratives revealed a determination and desire to achieve: "I want to do something with my life", "I want her to look up to me", "I will never let anybody stop me from getting an education". The protagonists had a sense of how they wanted to be: "I would try to do those things that were right", "I want to be open to guidance", "I think about myself and how I want it to be". Goals were expressed: "I'm trying to go to college, but it has been a struggle", "I want to do something with my life right now", "I work hard not to be like everybody else".

Recognition of aspects of self value helped to support their determination: "I did good in school", "I made good grades and things", "I've got a lot of good about myself", an "I'm glad I'm not like that". Short term goals gave a sense of purpose in the present: "I'm just gonna go to

school", "Right now the only thing I'm really thinking about is finishing my GED and going to college", "... opportunity for me to make it so I'm going to take it". One exemplar that captures the sense of determination was "I want to do something with my life".

Determination was a contrast to their sense of being helpless. The helpless was expressed in terms of their own emotions: "I didn't know how to control my own feelings", "I kept all that [hurt] in and it's still in". Helplessness was also experienced in their behavior or ways of coping: "I let bad people hang around me", "I used to run away". Inadequate coping strategies caused profound expression of helplessness: "I found myself wishin' I was dead and all that", "I attempted suicide".

Participants expressed a perception of being detached. This detachment was experienced in their peer group, which is incongruent with normal development during adolescence. The participants expressed "I thought I had friends, but I didn't have any friends", "I don't have any friends around here", "I didn't have any friends in the neighborhood". The sense of detachment was extended into the nuclear family: "I had no love in my house", "I wish my father was around", "My grandmother adopted me, basically for the money". One participant felt isolated from the broader community: "Nobody seemed to notice what I went through". The

perceptions of detachment crossed the boundaries of relationships and were integrated with identity: "I think nobody cares about me", "I think nobody loved me".

The participants had difficulty synthesizing miscreant activities of themselves, friends, family, integrating and community into a sense of self. This task was difficult: "... put it in the past and only think of it when I can laugh", "... maybe later I'll regret it, but not now". The self image learned through the feedback of others was an important aspect: "I'd get bothered by what others thought of me", "I don't want you thinking I'm a bad person". The process of integrating negative behaviors caused disequilibrium: "I don't want to have a bad side". The participants acknowledged their perception of a negative self: "There's a side of me you haven't seen", "No one should do the things I did", "I always blame myself", and "If I could go back to all those people that I hurt and apologize to them, I would".

Culture of Violence

The culture of violence impacted the development of a sense of identity. The process of acculturation has significant influence on identity development. The patterns that reflect culture are discussed. These are summarized in Figure 5.

Ubiquitous
Reflected in Media
Desensitized
Stereotypes

Figure 5. Culture of violence categories

The neighborhood was perceived as a constraint: "There's so much that goes on", "Living in those neighborhoods was real hard", "Being female and living in those neighborhoods was real hard". There was identification with the media culture: " "Boys in the Hood" had just come out and showed a drive by. A car go by real slow and I thought somebody was going to shoot at us", "Rap music, they tell you on the songs and everything, well, this, this, and that, and you go, damn I seen this happen... You can relate to it". Marijuana was enough a part of the culture that the participants became desensitized: "We experimented with drugs a couple of times, but never anything bad, so I didn't see anything wrong with it", "I never saw anything serious, I never saw like, well it was like marijuana. I never saw cocaine. They would buy marijuana", "People would smoke weed in school".

The perception that "kids fight all the time" was made. One participant stated "it makes for a lot of stereotypes", and "people think of teenagers as trouble makers, type cast them". Narratives that included stories about the police officers in the community illustrate this statement: "I don't like having to depend on them (police) to protect me", "When you can't trust police officers, who can you trust". There was a distrust of police officers among the participants: "I just don't trust them (police)", "I really don't trust police officers", "I'm skeptical of cops", "I do just dislike police officers a lot". One participant had a suggestion for police officers: "If I was a police officer, I'd try to listen to people more. I wouldn't be so aggressive".

Relationships

The interpersonal experience is significant in the development of identity and in developing a frame of reference. The primary relationships with our immediate care givers are crucial to how we see ourselves. The patterns that emerged from the data are discussed, and are also pictured in Figure 6.

Absent parenting

Abuse

Distrust

Family drug use

Missing father

Figure 6. Relationships categories

The protagonists in the stories viewed their parents as not caring for them: "She (mother) didn't give me anything", "they got me for the money", "No food in the house", "No furniture in the house".

Exposure to violence occurred within the familial environment as well as the community. The participants had personal experiences with abuse: "Terrible, livin in that house, terrible man", "I wanted to be out of my mother's house. I didn't want to be there with her, I hated it", "My mother was always saying negative comments toward me".

Relationships did not feel safe to the participants:

"Anybody can turn on you, change on you". The distrust

extended to friendships: "I associate with some of the boys

here, but I don't trust them", "I don't call people my

friends". Any relationship required caution: "Don't let anybody get close to you", "I don't trust anybody".

Family relationships were impaired by drug use.

Participants were aware of family members' drug use: "My sister was on love boat", "My dad's on drugs", "Everyone of my sisters was trickin, shootin dope in the bathroom with needles, all kinds of stuff", "At my mother's house, she had all the hustler's there stashing drugs".

Relationships with fathers were estranged. Participants expressed this in their stories: "My dad was never really in my life", "My dad ain't never been around", "My father was locked up off and on".

View of Right and Wrong

The protagonists in the stories were able to discriminate tight and wrong. The patterns that emerged are discussed. The patterns are also summarized in Figure 7.

Discriminate

Minimize

Shame

Justification

Figure 7. View of right and wrong categories

Some protagonists had ways of avoiding trouble: "I tell my friends I don't do stuff with drugs", "I think of the

consequences, if I do this...", "I don't want to be around this stuff, if anything happens I could be prosecuted".

Some protagonists were able to minimize wrong doing: "I had to hide his guns and stuff, but he never made me do things". Drug use was minimized: "I didn't know it was bad", "When you smoke dope you look at weed different than crack or dope".

Shame was expressed in the narratives. One protagonist stated: "I feel like I let myself down". Another expressed a moral duty to siblings: "I didn't want them (brothers and sisters) to see what I was doing". Expression of spirituality was affected: "I didn't want to go to church after I did the things I did".

Protagonists perceived their wrong doing as justified.

Meanings for wrong doing were: "The weed gave me a good

feeling, the problems you have for that moment go away", "I

used to have to do terrible messed up things to buy food for

my brother and sister", "I started selling drugs cause I was

trying to get me a job, but it seemed like nobody was hiring

me", "I was pressured into smoking weed".

View of the Future

The protagonists in the stories were concerned about being able to live to have a future. Patterns of a view of

the future emerged from the data. These are discussed, and are summarized in Figure 8.

Desire to live

Fear of getting shot

Want enjoyment

Safe place to live

Be a good parent

Get education

Be respected

Figure 8. View of the future categories

One protagonist underscored this concern: ""I knew if anything, I wanted to be livin'". Others had a hope for the future: "I hope I would be able to see my daughter grow up", "I have to continue my life". Some were optimistic: "I'm gonna live at least till I'm 90", "I just try to look to the future".

There was a preoccupation about dying from violence. Protagonists were concerned that they would be shot: "I worry, you never know if they pull the trigger, pull it out on you and you will die", "I think about getting shot a lot", "I don't want to get shot".

When thinking about the future, protagonists thought of places to live. A sense of security and safety was desired: "I need permanent housing", "I want to move to a good place", "I don't want to live around here", "I think about getting out of the neighborhood I'm in".

Some of the participants had children. Children gave the future meaning: "I got a baby, I got to think about her and her future", "I got to make it to take care of my child, become a responsible person", "My children will never go through what I went through".

Self respect and respect from others was important to the protagonists. An education was perceived as having value: "I want to go to college, buy a house, marry", "I am going to college", "After college I want to go to grad school". A career was important: "I want a career and everything", "I want to buy property and continue my career in finance". One protagonist wanted money and respect: "I want to make money and be somebody".

Conclusion

The data revealed patterns that describe the effects of exposure to community violence on aspects of adolescent identity development. A summary of the patterns all categories can be observed in Figure 9.

Meanings for Acts of Violence

Drugs Money Clothing

Competition

Anger

Impulsivity

Effects of Exposure

Confusion Avoidance Disbelief

Desensitization

School Vulnerable Sadness

Excessive Emotional distress

Self Identity

Distrustful Tired Defended

Justification Determination Helpless

Detached Disequilibrium Culture of Violence

Ubiquitous

Reflected in media

Desensitized Stereotypes

Relationships

Absent parenting

Abuse Distrust

Family drug use Missing father

Right and Wrong Discriminate

Minimize Shame

Justification

Future

Desire to live

Fear of getting shot Want enjoyment

Safe place to live Be a good parent Get an education Be respected

Figure 9. Summary of categories and patterns

The narratives contain descriptions of the effects of exposure to community violence on adolescent identity development. Themes emerged that would describe the process of identity development spanning the years 13 to 21 while being exposed to community violence. The themes are induced from the repetition of patterns that emerged during narrative analysis and constant comparison of the data.

The major theme that appeared throughout the narratives was one of oppression. The amount of violence in the community impeded the young people from engaging in activities that are generally expected of youth: school attendance, school activities, extracurricular activities, social activities, and play. Some of the participants experienced exposure to violence in their home environment, as well as the community environment.

Oppression

Distraction

Detachment

Distrust

Instability

Minimization

Figure 10. Themes

The following diagram demonstrates the predominant themes from this study of 13 interviews. These themes cannot be generalized, but represent only the sample for this study.

Exposure to Violence ⇒ Oppression

IJ

Identity Development ⇒ Strategies

IJ

Instability

 $\texttt{Distrust} \Leftarrow \qquad \Downarrow \quad \Rightarrow \, \texttt{Detachment}$

Figure 11. Diagram of the interaction of predominate themes

CHAPTER V

Summary and Discussion of the Findings, Conclusions, and Recommendations

Introduction

This chapter presents a summary of the findings of this study. The summary includes a discussion of the findings including implications for the domain of nursing, conclusions, and recommendations for future research.

The knowledge that children are exposed to violence is commonplace; however, long term effects are not known. The purpose of this study was to describe the effects of exposure to community violence on aspects of adolescent identity development.

Summary of Findings

The methodology for this study was a qualitative exploratory design that used a non-probability sample to describe the effects of exposure to community violence on phases of adolescent identity development. Data were collected by a demographic sheet (Appendix C), an age line (Appendix D), and a self narrative. Young adults between the ages of 18 and 21 were asked to tell their stories about experiences with exposure to violence during the developmental phase between 13 years and 21 years of age.

Data were collected from transcripts of the stories, and

analyzed according to the methodologies of narrative and constant comparative analysis.

A total of 14 participants agreed to tell their stories, but 13 completed the study. After completing the consent form, participants were asked to complete the demographic sheet. The data revealed a profile for the participants as having a mean age of 19.6 years, and being 43% male and 57% female. Data on that component of race indicated 11 Black, 1 Hispanic, and 2 of mixed racial background. Six participants lived with one parent, and half of these were with a mother; 5 indicated living with 2 parents; the remainder lived with a grandparent, aunt, or spouse.

The demographic sheet also included responses for types of violence exposure(s), frequency of exposure(s), and location of exposure(s). All participants indicated experiencing exposure to violence, and responded to all categories of violence on the questionnaire. The numbers of exposures ranged from 2 per person to 6 per person. Scripted responses were "a lot" and "many".

An unexpected finding was that one of the participants was threatened with violence 8 times. Threats of violence were not included in the original data collection, but two participants added "threats of violence" to the demographic data sheet.

The majority of exposures took place in the adolescent participants' neighborhoods. School and near home were indicated 10 times respectively.

Written entry of events on the age line served the purpose of guiding the narratives. The age line was used as a tool to help the participants recall specific events and experiences with exposure to violence. The adolescents could refer to their completed age line as they told their story. Eleven participants indicated their chronological age for each exposure to violence on the age line. There was not an age from 13 to 20 that was without exposure. Witnessing of killings or attempted killings were indicated at each age. Additionally, participants included events other than exposure to violence on the age line. The participants considered these events to be significant to their adolescent experience: peer pressure, no love in the house, moved out of home, not having friends, not going to school, getting pregnant, started smoking, mom evicted, and moved in with male friend. These additions proved to be valuable disclosures that enhanced description and understanding of the adolescents' experiences.

Thirteen participants participated in the narrative process. The fourteenth participant cancelled the story session twice, and then elected to not continue in the study. The participants were able to tell their stories with

relative ease. The participants were prepared to tell their stories over a period of three hours, and had chosen to tell their story in one setting. The story sessions lasted between 1½ to 3 hours. The mode was 2 hours. The participants were cooperative, candid, and spontaneous. Their attitude was sincere, and most expressed an interest in wanting to tell what was most salient.

According to Erikson (1963), continuity and sameness is an important step in the process of identity formation that begins with infancy. During adolescence, the young person has the task of coming to terms with what was previously the same to discover what is accepted as one's own. McAdams (1990) stated that episodes of continuity affirm identity. The stories in this study revealed a sense of discontinuity in the narrators' meanings of "who am I". This discontinuity extended to aspects of identity: distinguishing self from others, distinguishing right from wrong, and self image. The following excerpt indicates the discontinuity of self image and discrepant view of right and wrong: " I did the fighting, the cursing, the drinking and the smoking. I'm not saying what I went through was bad, cause, I had a real good time doing some of those things You see the type of person I am now, and you'd never believe...". Another excerpt demonstrates an attempt to distinguish self from others: " I found out that not any of the males in my family went

straight through high school. None of us got our high school diploma. Now I'm thinking of going to school to get my diploma to break this chain ".

Generally, a person wants the "who am I" to be a self that is perceived by others as good. The narratives in this study revealed a struggle between choosing to be the desired good self and taking the necessary steps for survival. The explanations for experiences, or resolutions, within the stories were attempts to find meanings for events and to resolve ambivalence or conflicts. The desired self was to be altruistic and determined to successfully complete goals for wellbeing in the future. "I want to be a nurse. I want to work with children. I think about that".

The process of developing identity requires self regard, development of values, judgments, and personal norms. Linde (1993) refers to this process as reflexivity, and states that it is necessary to develop a moral sense. The narratives indicated that the adolescents were confused about their moral identity. The ability to determine or choose right from wrong was not consistent during the developmental phase resulting in the lack of a coherent moral self. When conflicts occurred in the story telling, the participants distanced themselves from the events by keeping events in a previous time, minimizing immoral events or negative outcomes, or numbing expected emotions. Certain

misdeeds were minimized, such as marijuana use in comparison to other drugs that the participants had the perception of being more connected to violence. The following is an example, "I'm not gonna say some of those things I couldn't help, cause I coulda stopped it. It's in my past now. Maybe later I'll regret it, but not right now, maybe I should, but I don't. I just try to go on with my life".

As the story evolved and the good self had difficulty prevailing, the teller offered meanings that were external to the self. One meaning was that the good self did not fit into the culture of a community where violence is a "way of life". Another meaning is that use of violence is a necessity, a way of survival: Violence is a means to an end of acquiring basic needs and material goods.

Whatever resolution is given to the conflict or ambivalence, as the story evolves through the narration, a self with increasing efficacy emerges. It was important to the teller that the protagonist is perceived as being a good person. Each story included a goal or goals for the future that would support being a productive member of society: education, college, employment, housing, responsible parenting.

The participants attempted to be just in spite of seeing a lack of justice in others and in the community. It was important to distinguish themselves from the perceived

lack of justice in the community. Money is given as a reason for acts of violence. Young people are described in the stories as committing crimes in order to acquire desired goods and necessities, such as food. The participants also ascribed drug use as a predominant factor. These actions are seen as not being of concern, and they perceive complacency in the "larger community". The protagonists feel unprotected and disregarded. They think that their safety is up to themselves, and that no one else cares. Distrust is a predominant theme.

Distrust is pervasive. The participants cannot trust their family members, friends, or adults that might be in a position to intervene on their behalf. This lack of trust is extended to the police. The exceptions to this are the sibling system and the protagonists' children. Siblings might not be trusted to do the "right" thing in the larger social structure, but they are perceived as being worthy of benevolence and of reciprocating benevolence to the participants.

The participants valued benevolence in their own actions. They found a purpose in protecting their children and offering them a perspective of a benevolent world. It is significant that these young adults commit themselves to protecting those who they perceive as being more vulnerable than they are. This process offers an aspect of human caring

and value that the protagonists do not see as part of their daily life.

The stories suggest that the participants perceive violence as a resolution to conflict. Although this perception may serve as a justification, the stories reveal that it is counterproductive and conducive to increased hardship. There is a prevailing sense of helplessness that is experienced in the parental system, family system, school system, and community. There is fear of personal harm, insecurity about the future, and duplicity observed in those who could provide safety. The participants perceive themselves as having to fend for themselves.

Unfortunately, their available resources are limited, so they exercise a process of eliminating opportunities for potential harm. This generally results in abstaining from activities that are usually ascribed as necessary for normal development: peer activities in the community, school, or immediate neighborhood. Avoidance was also extended to school attendance.

Recreational activities or play for adolescents were generally avoided, unless it was an individual activity in the home or an activity with a selected group of peers. Even when this type of play occurred, the stories often mentioned direct or indirect exposure to violent events when in the

selected peer group, adding negative experiences to "safe play".

Care was taken to eliminate any identifying characteristics in the transcripts since some of the participants know each other. Gender was a characteristic that was removed in the transcriptions. Although it is not possible to compare a female participant's story to a male participant's, the stories can be evaluated as a whole. A common pattern in the stories is "fighting". This suggests that the females are engaging in aggressive behaviors that have been generally considered as male traits. Another common pattern was that of detachment. This occurred often. Although generalizations cannot be made, detachment by the females in this study takes exception from Gilligan's (1982) conclusions that girls rely on relationships

A major theme was one of oppression. The exposure to violence and fear of harm was pervasive, extending from the most intimate relationships of family and significant others to the larger community. The persistent presence of oppression during this phase of identity development affects the process by impeding the mastery of the generally accepted tasks for development. The young persons participating in this study utilized strategies to cope with the instability of identity. These strategies are distrust, detachment, distraction, and minimization.

Discussion

Violence was defined for this study as an action that restricts growth, inherent potential, and productive living (Bulhan, 1985). The data indicate that the frequency and type of exposure to violence during the developmental period between ages 13 and 21 are formidable. Since the participants lived in an inner city environment, the frequency of exposures is consistent with indications that urban areas have the highest rates of crime (Panel on High Risk Youth, 1993).

All participants had exposure to violence in the community, and ten participants had witnessed murder, shooting, and drive-by shooting. These frequencies are consistent with other findings in the literature (Bain & Brown, 1996; Berman, Kurtines, Silverman, & Serafini, 1996). The participants indicated that the amount of exposure to violence was excessive. The participants indicated through their narratives that they were exhausted by the amount of violence.

A major theme that emerged was oppression. This suggests that the exposure to violence during adolescence inhibited the development of the secondary changes of identity, achievement, intimacy, and attachment. Intimacy and attachment were avoided by the youth in this study. The participants identified themselves as being distrustful. A

pattern of distrust was pervasive in many of the narratives. Another pattern that described the self identity was detachment. The detachment was even evident within their peer group. Although these patterns served as a means for self preservation, they are antithetical to concepts generally expoused in developmental literature (Erikson, 1980; Gilligan, 1982).

Similar to the findings of Sells and Blum (1996), the adolescents in this study are concerned with self-protection, worry, and fear. According to Erikson (1980):

The sense of ego identity, then, is the accrued confidence that one's ability to maintain inner sameness and continuity (one's ego in the psychological sense) is matched by the sameness and continuity of one's meaning for others. Thus, self esteem, confirmed at the end of each major crisis, grows to be a conviction that one is developing a defined personality within a social reality which one understands (p.94).

The narratives indicate a lack of understanding of the amount of violence in the social reality of the participants. The participants struggled with a compromised psychological integrity, sense of helplessness, disequilibrium of both the internal and external environments. The lack of continuity and the contradictory relationships in the narratives suggest a threatened sense

of self. The chronic nature of the exposure to violence impedes understanding and coerces alternative methods of being. Rather than having support to thrive, these participants had to search for ways to survive.

The framework for a community is constructed from relationships. The relationships within a community offer experiences of both diversity and unity (Drevdahl, 1995).

According to Kasdin (1993), adolescents are dependent on and vulnerable to the impact of the living conditions of their parents. The oppressive conditions in which the participants in this study live suggest a community undergoing deconstruction.

Participants described relationships with their parents as abusive. Benevolence was not a theme that occurred in the relationships of these participants. The adolescents had a general distrust of others and felt that they had to face the world alone with only their inner resources. This distrust was extensive since some found that even the police were malevolent towards them.

Data from a study, asking parents of adolescents to discuss the issue of violence in focus groups, in addition to finding that violence is detrimental to adolescent development, concluded that love, family, home, and safety were important factors for violence prevention (Morris, 1993). Those positive elements of love, family, home, and

safety are not mentioned in the narratives of this study. The statement "there was no love in my house" is one example that suggests that those youth participating in violence may not have had those important factors offered by supportive parents.

Erikson (1980) continued to explain that growth relies on a sense of mastery of experiences that is unique to the individual, but successful within a personal and social context. Strength is gained through recognized accomplishment, "that is, achievement that has meaning in their culture" (Erikson, 1980, p. 95). When the environment interferes with this process, the child will strive to defy barriers in order to achieve identity.

The narratives in this study demonstrate that throughout adolescence, the participants resisted and adapted to the constraints in the environment. According to Erikson (1980), "the development of a healthy personality depends on a certain degree of choice, a certain hope for an individual chance, and a certain conviction in freedom of self determination" (p.99). The individuals in this study maintained a semblance of all three; however, the environment did not provide the security, safety, or support.

The environment in which these adolescents reside is not conducive to health. The environment is not stable and

does not meet the needs of the adolescents. The external resources are lacking, and according Jones and Meleis (1993), without resources, a community is not able to facilitate empowerment. These conditions underscore concern for the overall health of these young people.

Anderson (1997) completed an ethnographic study of a poor inner city black community. The data were obtained through visits to the inner city neighborhood and intense interviews that included interviews with adolescents.

Anderson (1997) found that there were two coexisting constructs that organized the inner city community. There were positive influences of strong, loving "decent" families to counteract the negative ones; however, " the despair is pervasive enough to have spawned an oppositional culture, that of 'the streets'"(p.1). Similarly, the pervasiveness of despair in Anderson's (1997) data is revealed to the "listener" of the adolescents' stories in this study.

Anderson (1997) found the street culture to be so developed that there was a set of informal rules, called "code of the streets". "Knowledge of the code is thus largely defensive, and it is literally necessary for operating in public" (p.2). This street culture provided a means of interpersonal negotiation, but was also a cultural adaptation to the lack of trust in the police. Anderson

(1997) observed that alienation and hopelessness cycled with violence, each perpetuating the other.

Although Anderson (1997) found that there were persons fully invested in the street culture, and as a result, were fearsome and fearless, there were others who were partially vested in both the "street" and "decent". These findings are consistent with the behaviors described in the adolescents' narratives of this study. Fights and altercations were, at minimum, a means to get by: "One person gets hurt and you try to get the person".

One study indicated that violent behavior was significantly correlated with exposure to violence and victimization in the community, degree of witnessing family conflict, and severity of corporal punishment used at home (DuRant, Cadenhead, Pendergrast, Slavens, & Linder, 1994). These factors were present in the narratives of this current study, and for some stories all were present:

I went through a lot, especially my mother. She was terrible. She was just a young mother. She had me when she was 16, and turned around and had my sister when she was 18, and then had my brother when I was 6. It was hard on her having 3 kids, 3 different fathers, 2 bedroom, living in a dirty neighborhood around drugs, prostitutes, people killing each other, robbing each other, stabs. It was hard on her. She took her anger

out on us. We went through the beatings and getting put out. Her not wanting to give us money, not wanting to feed us. A whole lot of stuff.

Although some of the adolescents in this study of adolescent narratives were involved in aggressive violence, this trend of behavior did not seem to continue into late adolescence. The adolescents indicated that at some point, they decided that they wanted to stop using violence: "I just try to look for the future. I could get into arguments, but I won't fight."

Slaby (1997) stated that violence is not an inevitable result of exposures or experiences with violent events, and that young people who are not vested in violence have developed an "immune system" made up of psychological mediators. The mediators were not named, but referred to as cognitive scripts or schemas that consistently guided and supported an "immunity" to adapting violent behavior.

The narratives of the adolescents in this study revealed that although the adolescents recognized and utilized the "code of the streets", they did not adapt this code for their own moral script, rather, they tried to be "decent":

If I could go back to all those people that I hurt and apologize to them, I would. If I could hug them and sit down and cry with them, I would. Other than that I'm

alright, I'm O.K. I try not to show my own anger in the attitude I have.

Negotiating this contradiction contributed to the discontinuity observed in the stories. The "decent" code was the desired behavior that enabled these adolescents to develop a coherent self.

Garbarino (1999) stated that:

The views of Jung, Frankl, and Cohler are part of a long and distinguished tradition in psychology and psychoanalysis that maintains that the foundation for feeling good about oneself, thinking clearly about the world, and leading a morally responsible life is having a purpose in life that provides a strong sense of meaningfulness (p.153).

Garbarino (1999) adds that this becomes crucial when faced with hardship or adversity. Perhaps this captures the essence of the "immunity". Prothrow-Stith (1991) also stressed the importance of a sense of future for adolescents: "Having a future gives a teenager reasons for trying and reasons for valuing his life"(p. 57). A study of urban girls and their identity development found that the presence or absence of opportunities and resources play a major role in fostering positive self image (Erkut, S., Fields, J.P., Sing, R., & Marx, F., 1996).

The adolescents' stories in this study did discuss having a purpose in life. Some had children that provided a meaning for their life. Others had goals to go to college. Although for some the goals were not clearly defined, the desire for a good job or a place to live gave them a purpose: "Ever since I was 2, I was drawing. I knew I wanted to draw cartoons, do computer graphics. When I get my GED, that's what I want to go to school for is computer graphics."

Hunter and Chandler (1999) randomly selected adolescent high school students to explore their meanings of resilience. Their data were obtained through a triangulated design, using a demographic tool that the researcher developed to document adversities in the environment, Wagnild and Young's (1993) resiliency scale, a written exercise, and focus groups. The free writing exercises were discussed in focus groups.

Their data indicated that the adolescents perceived themselves as being resilient. Resiliency was based on categories as follows: a sense of invincibility, insulation of feelings, isolation, distrust, and acting out with violence to be heard and seen. Similar to the narratives in this study of violence, the adolescents in their study perceived themselves as being without any one to depend on

or trust, so consequently, saw themselves as being self reliant and self protective.

Hunter and Chandler (1999) concluded that the adolescents' perception of resilience differed from the intended measurement of the Wagnild and Young's (1993) resiliency scale. The scale measured two major factors that accounted for 44% of the variance: personal competence, and a balanced perspective of life. Data obtained from the Resiliency Scale (Wagnild & Young, 1993) without the additional qualitative data collected by Hunter and Chandler (1999) would have missed the finding that the adolescents' narratives revealed inconsistency with the accepted meaning of resilience. Hunter and Chandler's (1999) data demonstrated that the adolescents did not have a healthy sense of self or a strong sense of self worth, and that they attempted to survive through mechanisms of disconnecting and distrusting others.

The narratives in this study described strategies that the adolescents used in order to survive. These strategies do not indicate a healthy sense of wellbeing. The strategies were created to cope with confusion, emotional distress, fear of getting shot, and thoughts that exposure to violence was excessive. These strategies included: distrust, avoidance, detachment, and minimization. These adolescents were not resilient from the perspectives of having a

personal competence and a balanced perspective of life. The narratives indicate that the youth survived, were able to resolve issues, and establish meanings to their experiences. This was not accomplished through resilience, but through struggle with conflict and a sense of helplessness that was matched with a determination to live and have a future.

Use of Psychobiography and Narrative Methodology Psychobiography

These stories revealed the endurance of these young people. The content of their personal stories conveys the prevailing dignity of these youth, and their inherent ability to overcome the threatening environment. Denzin (1997) indicated that psychobiography reveals such aspects of living. These stories allowed the researcher to become familiar with the inner selves, suffering, dreams, and triumphs of the protagonists in the stories. These narratives provided the researcher with tools to understand individual persons and study specific processes and behaviors as they related to exposure to violence.

As indicated by Mishler (1986), the valued social identity of these young people was revealed through their stories. The stories provided a means for the participants to organize and express meaning. Consistent with the premises of Bruner (1986, 1990, 1994), the stories gave the researcher a sense of the culture, history, and resources of

the participants. The process of story telling afforded the participants an opportunity to interpret the deviations from desired norms and to develop personal beliefs and meanings. The participants struggled with a lack of coherence in order to achieve a desired identity.

It is evident in these stories that meaning is socially developed. This is consistent with Bruner (1990). The participants in this study had to rectify the subculture of violence with the expected behaviors of members of the larger culture. Even though this may have been a difficult task for some of the participants who indicated they had not been out of the inner city environment, the participants had expectations of a good self.

Narrative methodology

Narrative methodology enables the researcher to explore the personal accounting of individual life experiences. "Questionnaires, for example, limit our informants to narrow menus of preselected questions and answers" (Ochberg, 1996, p.97). The following sections discuss the advantages and disadvantages of narrative methodology.

Advantages

The use of story telling gives the researcher an understanding of a person, their internal and external realities, and the meanings of their life experiences.

Giving voice to the participants offers data that might otherwise go unobserved by researchers.

The data in this study certainly expand that of
Richters and Martinez (1993) who determined that the
exposure to violence for inner city youth was excessive.

Much would be lost if the data stopped with the numbers and
locations of exposures to violence. These participants also
revealed through the process of story telling their
perceptions of the causes and effects of violence: drugs,
money and school dropouts and death, respectively. The
accepted premise that peer acceptance is important for
adolescents takes on a different meaning when the data
indicate that the extent of that drive for acceptance can
result in shooting a peer to acquire the "in" style of
clothing. The fact that young people avoid attendance at
social events due to fear of being victims to violence might
also go unrecognized.

Another example of the value of qualitative data can be observed in Way's (1998) study. Way concurred that questionnaires, as a rule, have predetermined definitions or categories, and used narrative methodology to complete a three year longitudinal study of the narratives of 24 urban adolescents. The research focused on exploring narratives to answer questions of how adolescents perceive their world, how perceptions change over the course of development, and

how this influences our understanding of this developmental phase.

The data obtained through the process of telling a personal story contradicted the frequent descriptions of adolescents as "hopeless". Way (1998) discovered that adolescents had hope for their personal future in spite of the "hopeless" conditions of the world, and that adolescents were future oriented when discussing their goals.

Similarly, Hunter and Chandler (1999) found an unconventional meaning for the construct of resilience emerge from the adolescents' stories. Listening to the adolescents' descriptions and meanings of their live events enabled the researchers to identify and describe certain survival strategies used by adolescents.

Additionally, Hunter and Chandler (1999) observed that, as the adolescents participated in the focus group, their cognitive, expressive, and behavioral processes changed. The researchers conducted a post-test in response to those observations, and found scores indicating higher resilience when compared to the pre-test.

These findings support the use of narrative as a dynamic process between participant and researcher because, in addition to providing researchers with data, it provides an opportunity for participants to clarify and organize a self concept. This process results in altered interpersonal

and intrapersonal functioning (Bruner, 1994; Manusco & Sarbin, 1983; Miller, 1989). This study and others (Hunter & Chandler, 1999; Way, 1998) demonstrate that sharing narratives promotes social understanding, which in accord with Bruner (1994) and Baumeister (1991) would legitimize lived past events and reveal communal events.

Despite concerns of possible negative effects from discussing topics of a sensitive nature, this methodology provided an opportunity for catharsis and for the adolescents to develop a coherent self. Miller (1996) describes the use of narrative as helping individuals reflect on their self and the meanings of their lives.

Miller (1996) views this as an ethical process, resulting in ethical outcomes. This process is dynamic since it considers the teller and the listener as participating in dialogue.

"In short, I was constantly being affected and influenced by the other. I, in turn affected and influenced them. I can only stand in awe of such experiences" (Miller, 1996, p. 146.)

Disadvantages

The protection of anonymity for the participants in this study was and remains important. Since a majority of participants were recruited from the same setting or referred by each other, the need for added caution is underscored. Unlike Way's study (1998) where gender

differences in narratives were identified and discussed, the indication of gender in the analysis of the findings reported here could risk identification of participants to each other. Although one participant would know of another's sharing their stories, the personal aspects of self narratives are not known.

Although Way (1998) found differences between male and female adolescents in their relationships and trust, there was no indication of this across the narratives of this study. Although it was not possible to compare these differences in this study, this would be of value from a developmental perspective. For example, Gilligan (1982) found that girls differ from boys in the importance of relationships in development. An overview of the narratives in this study suggests that all the stories reveal a need for connectedness, relationships, and disclosure. It could be valuable to explore these latter concepts to discover subtle or overt changes from the well accepted tenets of developmental psychology.

Use of Constant Comparative Analysis

The constant comparative method was performed to look for themes that represent the repetitive patterns in the data from the stories. Although narrative analysis elucidated the life experiences and meanings of the participants and can certainly stand on its own merit, the

addition of constant comparative methodology provided concepts that are readily communicated and generally understood. The identification of concepts allowed for comparison of the findings to other studies. These concepts offer data that can be further tested.

Limitations

The size of the sample and the non-randomized design restrict findings to this sample alone, and prevent generalization. Although the content of the narratives provides descriptive details of the inner city life of the participants, comparison from a broader population and suburban or rural population would be necessary to suggest shared meanings from exposure to community violence on adolescent development. According to Riessman (1993), general knowledge can be achieved from the particulars, inferring that findings from small studies, such as this, are "a starting point in analysis, not the end" (p. 70).

The intent of this study was to use story telling so that the participant would be free to choose what was said and the extent of what was said about exposure to violence. This was accomplished by not imposing questions or comments during the process. Riessman (1993) favored less structure in order to give more control to the participants. This approach precludes opportunities for closer exploration. Similarly, the focal point of the story telling was to

describe the effects of exposure to violence, at the cost of exploring other aspects of development.

Implications and Recommendations for Nursing Practice and Research

Nursing practice

Nurses are in a unique position to have contact with a large number of adolescents in a variety of settings. The ubiquitous nature of exposure to violence suggests that inquiry about exposure should be made part of a routine health assessment. Indication of exposure to violence could then alert nurses to provide opportunities for further dialogue through personal exploration or referral. It is important to allow adolescents opportunities to discuss the meanings of exposure to violence.

The content of the narratives also suggests that nurses need to explore aspects of home life. A child or adolescent might appear to be nourished and appropriately dressed, yet an exploration of how that happens would certainly be beneficial when children are stealing or drug dealing to acquire the basics. Staub (1996) pointed out that a method of parental discipline commonly used is physical punishment. Primary care nurses can explore these issues, and can accomplish this through collaboration. A working relationship with community health nurses, public health nurses, and social service organizations could assist nurses

to "reach" outside of traditional boundaries into the homes for complete assessments and interventions.

School nurses are in a unique position for intervention. The adolescents in this study indicated absences or withdrawal from school due to fear of potential harm. Follow-up inquiry of absences could open dialogue, explore coping strategies or intervention, and encourage completion of school, rather than risk consequent apathy and early withdrawal from school. School nurses could also initiate or participate in educational programs that teach students alternative methods of problem solving as a substitute for violence.

The awareness that intense emotions of anger and sadness over long periods of time contribute to hyperarousal is a major health concern from both physiological and behavioral perspectives. Adolescents need a method of releasing these emotions. Teaching relaxation techniques, initiating exercise programs, journal writing, or offering peer group would offer adolescents alternative methods of expression. School nurses could also provide education about the physiology and behaviors related to stress. The evidence that there is significant numbers of inner city youth exposed to violence could be presented for courses addressing prevention and treatment to be included in school curricula.

Psychiatric nurses involved with adult substance abuse programs can assess the family system. When there are children, it is important to assure their sense of well-being. These narratives emphasized that children and adolescents are affected by parental drug use. Family therapy would be an important addition to addiction treatment. It would also be important for nurses to have an awareness of community resources to make appropriate referrals for the children and adolescents to get support.

There was no indication in these narratives that children placed in the foster care system get mental health counseling. Many children are placed in the system due to parental hardship, loss, or abuse. Counseling during this transitional period would help with adjustment, and also assure that the children are receiving adequate care.

Nurses working in hospital emergency rooms and on inpatient units are in a unique position to observe the
consequences of gun violence. Nurses can be proactive in
policy development, community initiatives, and other aspects
of the public arena to develop interventions to stop gun
access to children. These nurses are also in a position to
counsel and help the family members of the victims of gun
violence. Severe gunshot wounds can have long term sequelae,
physical impairment, and disability. Vassar and Kizer (1996)
evaluated discharges of 9562 patients with firearm related

injury. Their data indicated that 72% of those patients were 15 to 42 years of age.

The increasing lethality from handguns is related to their increased availability. Gun ownership in the general population increased from 20% in 1973 to 25% in 1994 (Blendon, Young, & Hemenway, 1996). Nurses can get involved with the on-going debate that centers on four issues: constitutional right, who can own guns, government registration, government control of types of guns owned (Blendon, et al., 1996).

Nurses can get involved with media (editors, film, music) to influence reporting and programming that promote positive and moral behavior (Rollins, 1993). Media can empower youth and community by communicating the value, accomplishments, contributions, potential of young people. Nursing research

It is recommended that this study be replicated using larger populations. This study should be extended to include adolescents of suburban and rural areas. Randomized sampling methods would make generalization of findings possible. It would also protect anonymity when identifying similarities and differences between gender and ethnic groups. This is a concern in this study since sampling occurred by participants encouraging friends to contribute to this study. It was especially important to protect these

adolescents since their stories included such explicit detail of their life experiences.

There can be no generalization about ethnicity in this study. Poverty is a predictor of violence, not ethnicity (Staub, 1996). Prothrow-Stith (1991) indicated that Caucasian communities with unemployment and high numbers of female headed households suffer from violence and crime as well. Exploring cultural characteristics and how they develop can lead to a greater understanding and acceptance, and reduce the occurrence of disenfrancized groups or persons (Staub, 1996).

A longitudinal study of the effects of exposure to violence during the developmental period from 13 to 21 would provide valuable data. A comparison of stories across this span would reveal the process of meaning making and changes in self view as they occur. This would also offer an opportunity to test the finding in this study and others (Hunter and Chandler, 1999) that self efficacy evolved through the telling of the story.

The National Center for Nursing Research (NCNR) prepared a research agenda regarding health promotion for adolescents (NCNR, 1993). A significant issue that was identified in nursing care of adolescents was the adequacy of educational preparation. A national survey of multidisciplinary providers indicated that one-fourth of the

participating nurses who worked with adolescents had skill deficiencies. More than 40% reported insufficient preparation to address adolescent health issues such as substance abuse and depression (Bearinger, Wildey, Gephart, & Blum, 1992). Additionally, the NCNR reported lack of preparation for counseling and therapeutic interview skills. Nursing research is needed to determine effective ways to prepare nurses for adolescent health care. Research can identify competencies and appropriate education and training (NCNR, 1993).

How adolescents are spending their leisure time is missing from the data of this study. It is known from the data that there is avoidance of school and organized activities due to fear, but participation in recreational activities is not known.

The willingness of adolescents to discuss their issues, as observed in this study and others (Hunter & Chandler; Way 1998), suggests that focus groups could be an efficacious method to explore possible community interventions.

Adolescents can be valuable informants about what is needed to improve their lives, and they could also help identify weaknesses in the structure of the community. It could be anticipated that such dialogue would eventually have an impact on the incidence of violence in the community.

Elster (1993) suggested computerized interactive systems to deliver health care to adolescents. This could provide opportunities in education and assessment for adolescents while offering privacy. Privacy is a significant concern for adolescents. A study of youth's exposure to violence indicated that victims did not receive medical or psychological intervention. The researchers suggested that adolescents were reluctant to disclose (Gladstein, Slater Rusonis, & Heald, 1992). There was evidence in this study of adolescent identity development that health care providers were under utilized. Research could explore adolescents' attitudes about seeking health care after exposure to violent events.

Further research is needed to expand the knowledge of development. The adolescents in this study were not preoccupied with the accepted task of disengaging from the parental system to engage with the peer system. Rather, these adolescents were struggling with real problems of distrust and immorality. As Way (1998) recommended, it might prove more useful to learn what adolescents are "actually struggling with, rather than what developmental theories have proposed "what they should be struggling with" (p.265).

Conclusion

This study of adolescents' stories of their exposure to community violence resulted in data that describe how aspects of identity development are affected during this critical phase. The data obtained through the narratives offer broader descriptions of the perceptions and consequences of the exposures than data from surveys or questionnaires. Although this data cannot be generalized, they provide support and stimulus for further study and implications for practice. Additionally, the data offers nurses new insights and considerations for assessment, interventions, and health promotion of adolescents who reside in environments with high incidence of violence.

APPENDIX A

Contact Sheet

Deborah Schiavone may contact me to discuss her research. I have not received psychiatric care in the past, and I have not been incarcerated.

Telephone #



THE CATHOLIC UNIVERSITY OF AMERICA

School of Nursing
Washington, D.C. 20064
202-319-5400
FAX 202-319-6485
APPENDIX B

CONSENT TO PARTICIPATE IN RESEARCH STUDY

Name of Study: A description of the effects of exposure to community violence on aspects of adolescent identity development.

Investigator: Deborah Schiavone, RN, CS
Telephone: 703-914-6770

Supervisor: Sr. Mary Jean Flaherty, PhD, FAAN

Purpose: I understand that the researcher is interested in being able to describe and interpret experiences with exposure to violence by listening to the self stories of adolescents. I understand that this study is in partial fulfillment for a doctoral degree in nursing at Catholic University of America.

Procedure: I will be asked to complete an "age line" indicating specific events that occurred during my adolescent years. I will use this line as a starting point to help me organize a story that I will tell about myself. I understand that this may take up to three hours of my time. I understand that I may choose to meet three times for one hour each, or meet one time for a maximum of three hours. I understand that I can gauge this according to my own energy level. I understand that Mrs. Schiavone will be audio-taping the meetings. These tapes will be transcribed into written material. I also understand that Mrs. Schiavone will be taking notes during my story. These notes will be to record items of interest that cannot be heard on audio-tape. I am also willing to complete a form asking my age, gender, ethnicity, family size, relationship to members of my household, type of exposure to community violence, amount of exposure, and location of exposure.

Risks and Inconveniences: I understand that telling my story might trigger uncomfortable feelings. I understand that Mrs. Schiavone is an experienced advanced practice psychiatric nurse and can help me with those feelings or refer me to an appropriate counselor. I also understand that if she or myself feels that it would be too uncomfortable to continue with the story that we will stop and continue after a rest period. I understand that I can choose to discontinue my participation at any time during the interview. I understand

that Mrs. Schiavone is not protected by immunity for knowledge of any criminal activity, and that she is bound by law to report any suspicion of abuse to a minor. Benefits: I understand that telling my story to another person can be helpful and result in feelings of relief and a sense of value. The telling of my experiences can help me to learn about myself, and put things in a new perspective. Confidentiality: I understand that all materials collected by Mrs. Schiavone will be coded and will not have my name attached. I understand that I will not be identified on any data materials. Identifying content will be kept separate from data and in a locked place. I understand that I do not have to say or reveal anything that I choose not to. Mrs. Schiavone informed me that my story will be studied by her for a research analysis so that others might learn from what I have experienced, and that this is done without anyone having knowledge about who I am. I also know that research information could be subpoenaed by the courts or inspected by federal regulatory agencies.

I have had an opportunity to ask questions regarding the study and have had them answered to my satisfaction. I have received a signed copy of the consent form. I volunteer to participate in this study.

	Date:
Participant's signature	-
	Date:
Investigator's signature	

Any complaints or comments about my participation in this research project should be directed to the Secretary, Committee for the Protection of Human Subjects, Office of Sponsored Programs in Research Services, The Catholic University of America, Washington, DC 20064 202-319-5218

APPENDIX C

DEMOGRAPHIC SHEET

Please	check the	e correc	t answe	er:					
Age:	□ 18	□ 19	□ 20) <u> </u>	21				
Gender:	2 1	Male	□ E	`emal	е				
Ethnic	Backgrou	□ A	merican	Ind.	an E His ian E Ca	ucasian	ı		
Family	Size (in	cluding	self):	□1 3	□2 □3 □4	I5 I6 I	7 ∃8 ∃9	□10 □11	□12
				two sib aun spor	parent parents ling(s) t(s) use end(s) nificant	I step I gran I uncl I my cl I othe	parent dparent e(s) hild or	(s)	1
Type of	Exposur	e to vio	lence:	5	physical Z with				
(check	all tha	t apply)			robbery				
	te numbe:			0 0000	rape with murder shooting stabbing drug dead drive by	or 🗆 w al shooti	# # # # ng #	weapon	
Locatio	n of exp	osure:	3 scho						
(Check	all that	apply)	□ near	home	e	Ξ	near so	chool	
			□ pla∈	ce of	recreati	ion 3	neighb	orhood	
					place		other_	-	

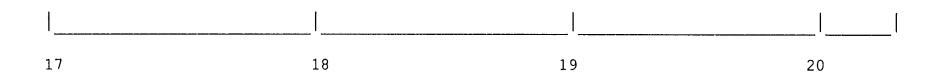
APPENDIX D

Age Line

Indicate the occurrence of violent event(s) at approximate age.

Indicate any events that you think are significant in your adolescence.





APPENDIX E

Code Themes

Pause in narration TRA Transition CA Complicating Action EV Event	
Ch Complicating neutron	
man managan ma	
A Abstract TP Turning poi	nt
O Orientation SE Setting	
R Resolution	
C Coda	
E Evaluation	
SP Starting point	
DS Distinguishing self from others	
TS Temporal sequence	
SE Sequencing of events	
SC Sense of continuity	
PD Personal disclosure	
PT Patterns of talk	
CF Cultural factors	
SP Social patterns	
RO Roles	
SA Social acts	
CO Conflict	
SO Solution	
CH Choice	
PA Psychological aspect	
RE Reward	
PE Penalty	
OU Outcome of action	
SU Story Unit	
CON Connective	
ME Meaning	

APPENDIX F

Contact Summary Sheet

Contact type: Location:
Code #
Interview Date:
Phone Time:Length of time:
Interview #
Key informant ☐ Interviewee ☐
Main issues or themes:
Summary of information:
Summary of information not obtained:
Items of salience, interest, illuminating, or significant:
Remaining target questions for the next contact:
Time and date of next contact:

REFERENCES

Altman, D. (1995). Strategies for community health intervention: Promises, paradoxes, pitfalls. <u>Psychosomatic Medicine 57</u>, 226-233.

Anderson, E. (1997). Violence and the inner city street code. In J. McCord (Ed.), <u>Violence and childhood in the inner city</u> (pp. 1-30). Cambridge, United Kingdom: Cambridge University Press.

Attinasi, J., & Friedrich, P. (1995). Dialogic breakthrough: Catalysis and synthesis in life changing dialogue. In D. Tedlock & B. Mannheim (Eds.), The dialogic emergence of culture (pp. 33-53). Chicago: University of Illinois Press.

Ayres, L., & Poirier, S. (1996). Virtual text and the growth of meaning in qualitative analysis. Research in Nursing and Health, 19(2), 163-169.

Bailey, P. (1996). Assuring quality in narrative analysis. Western Journal of Nursing Research, 18(2), 186-194.

Bain, J., & Brown, B. (1996). Adolescents as witnesses to violence. Journal of Adolescent Health, 19(2), 83-85.

Baumeister, R. (1991). <u>Meanings of life</u>. New York: Guilford Press.

Baumeister, R., & Newman, L. (1994). How stories make sense of personal experiences: Motives that shape

autobiographical narratives. <u>Personality and Social</u> Psychology Bulletin, 20(6), 676-690.

Bearinger, L.B., Wildey, L., Gephart, J., & Blum, R. W. (1992). Nursing competence in adolescent health:

Anticipating the future needs of youth. <u>Journal of</u>

Professional Nursing, 8(2), 80-86.

Berman, S., Kurtines, W., Silverman, W., & Serafini, L. (1996). The impact of exposure to crime and violence on urban youth. American Journal of Orthopsychiatry, 66(3), 329-335.

Blendon, R., Young, J., & Hemenway, D. (1996). The American public and the gun control debate. <u>Journal of the American Medical Association</u>, 275(22), 1719-1722.

Broome, M.E., Woodring, B., O'Connor-Von, S. (1996).

Research priorities for the nursing of children and their families: A Delphi study. <u>Journal of Pediatric Nursing</u>,

11(5), 281-287.

Bruner, J. (1986). <u>Actual minds, possible worlds.</u>
Cambridge, MA: Harvard University Press.

Bruner, J. (1990). <u>Acts of meaning</u>. Cambridge, MA: Harvard University Press.

Bruner, J. (1994). The "remembered self". In U. Neisser & R. Fivush (Eds.), <u>The remembered self</u> (pp. 41-54). New York: Cambridge University Press.

Bulhan, H. A. (1985). Frantz Fanon and the psychology of oppression. New York: Plenum Press.

Bureau of Justice Statistics. (1997). Age patterns of victims of serious crime (NCJ-162031). Washington, D.C.:
U.S. Department of Justice.

Centers for Disease Control. (1994). Vital and health statistics: Health of our nation's children (Series 10 No. 191). Hyattsville, MD: U.S. Department of Health and Human Services.

Centers for Disease Control. (1995). Youth risk behavior surveillance. Morbidity and Mortality Weekly Report, 44 1-25.

Centers for Disease Control. (1996). Youth Risk
Behavior Surveillance System- United States, 1995. Morbidity
and Mortality Weekly Report, 45(No. SS-4), 1-86.

Centers for Disease Control. (1997). Rates of homicide, suicide, and firearm-related death among children in 26 industrialized countries. Morbidity and mortality Weekly Report, 46, 101-105.

Cohen, M. (1996). Great transitions: Preparing adolescent for a new century. <u>Journal of Adolescent Health</u>, 19(1), 2-5.

Cook, P., & Cole, T. (1996). Strategic thinking about gun markets and violence. <u>Journal of the American Medical Association</u>, 275(22), 1765-1767.

Cortazzi, M. (1993). <u>Narrative analysis</u>. London: Falmer Press.

Denzin, N. (1989). <u>Interpretive biography</u>: <u>Qualitative</u> research methods series 17. Newbury Park, CA: Sage.

Denzin, N. (1997). <u>Interpretive ethnography</u>. Thousand Oaks, CA: Sage.

Department of Health and Human Services. (1991).

Healthy people 2000. Washington, D.C.: U.S. Government

Printing Office.

Dreher, M. (1996). Nursing: A cultural phenomenon. Reflections, 22(4), 4.

Drevdahl, D. (1995). Coming to voice: The power of emancipatory community interventions. Advances in Nursing Science, 18(2), 13-24.

Du Rant, R., Cadenhead, C., Pendergrast, R., Slavens, G., & Linder, C. (1994). Factors associated with the use of violence among urban black adolescents. <u>American Journal of</u> Public Health, 84, 612-617.

Elster, A. (1993). Confronting the crisis of adolescent health: Visions for change. <u>Journal of Adolescent Health</u>, 14(7), 505-508.

Erikson, E. H. (1963). <u>Childhood and society</u>. (2nd ed.). New York: Norton.

Erikson, E. (1980). <u>Identity and the life cycle.</u> New York: Norton.

Erkut, S., Fields, J.P., Sing, R., & Marx, F.(1996).

Diversity in girls' experiences: Feeling good about who you are. In B.J. Ross Leadbetter & N. Way (Eds.), <u>Urban girls:</u>

Resisting stereotypes, creating identities (pp.53-64). New York: New York University.

Fingerhut, L., Ingram, D.D., & Feldman, J.J. (1998).

Homicide rates among U.S. teenagers and young adults.

Journal of American Medical Association, 280(5), 423-427.

Fitzpatrick, K., & Boldizar, J. (1993). The prevalence and consequences of exposure to violence among African

American youth. American Journal of the Academy of Child and Adolescent Psychiatry, 32, 424-430.

Flack, J., Amaro, H., Jenkins, W., Kunitz, S., Levy, J., Mixon, M., & Yu, E. (1995). Panel I: Epidemiology of minority health. Health Psychology, 14(7), 592-600.

Freire, P. (1970). <u>Pedagogy of the oppressed.</u> New York: Seabury Press.

Gabarino, J. (1999). <u>Lost boys: Why our sons turn</u> violent and how we can save them. New York: Free Press.

Gergen, K. J., & Gergen, M. M. (1983). Narratives of the self. In T. Sarbin & R. Scheibe (Eds.), <u>Studies in social identity</u> (pp. 254-273). New York: Praeger.

Gilligan, C. (1982). <u>In a different voice:</u>

<u>Psychological theory and women's development.</u> Cambridge, MA:

Harvard University Press.

Gladstein, J., Rusonis, S., & Heald, F. (1992). A comparison of inner city and upper middle class youths' exposure to violence. <u>Journal of Adolescent Health</u>, 13(4), 275-280.

Glittenberg, J. (1995). <u>Violence in our land.</u>
Washington, D.C.: American Academy of Nursing.

Hall, J. (1996). Geography of childhood sexual abuse:
Women's narratives of their childhood environments. Advances
in Nursing Science, 18(4), 29-47.

Henderson, D. (1995). Consciousness raising in participatory research: Method and methodology for emancipatory nursing inquiry. <u>Advances in Nursing Science</u>, 17(3), 58-69.

Hinton-Nelson, M., Roberts, M., & Snyder, C. (1996).

Early adolescents exposed to violence: Hope and vulnerability to victimization. American Journal of Orthopsychiatry, 66(3), 346-353.

Holton, J. (1995). Witnessing violence: Making the invisible visible. <u>Journal of Health Care for the Poor and Underserved</u>, 6(2), 152-159.

Hunter, A., & Chandler, G. (1999). Adolescent resilience. Image: Journal of Nursing Scholarship, 31(3), 243-247.

Jenks, J. (1995). New generation research approaches.

In H. Streubert & D. Carpenter (Eds.), Qualitative Research

in Nursing (pp. 242-268). Philadelphia: J.B. Lippincott.

Johnson, C. M. (1997). Adolescents in psychiatric-mental health nursing: Adaptation and growth. In B. S. Johnson (Ed.), <u>Psychiatric-mental health nursing: Adaptation and growth</u> (4th ed., pp. 411-436). Philadelphia: Lippincott-Raven.

Johnson, K., Anderson, N., Bastida, E., Kramer, B., Williams, D., & Wong, M. (1995). Panel II: Macrosocial and environmental influences on minority health. <u>Health</u>
Psychology, 14(7), 601-612.

Jones, P., & Meleis, A. (1993). Health is empowerment.

Advances in Nursing Science, 15(3), 1-14.

Kasdin, A. (1993). Adolescent mental health: Prevention and treatment programs. <u>American Psychologist</u>, 48(2), 127-141.

Kett, J. F. (1993). Discovery and intervention in the history of adolescence. <u>Journal of Adolescent Health</u>, 14, 605-612.

Linde, C. (1993). <u>Life stories: The creation of</u> coherence. New York: Oxford University Press.

Mandelbaum, D. (1982). The study of life history. In R. Burgess (ED.), Field research: A sourcebook and field manual (pp. 145-151). London: George Allen and Unwin.

Manusco, J., & Sarbin, T. (1983). The self narrative in the enactment of roles. In T. Sarbin & K. Scheibe (Eds.), Studies in social identity (pp. 233-253). New York: Praeger.

Marans, S. (1994). Community violence and children's development: Collaborative interventions. In C. Chiland & J.G. Young (Eds.), Children and violence (pp 109-124).

Northvale, NJ: Jason Aronson.

Mattingly, C. (1991). The nature of narrative clinical reasoning. The Journal of Occupational Therapy, 45, (11), 998-1005.

McAdams, D. (1988). <u>Power, intimacy, and the life</u>
story: Personological inquiries into identity. New York:
Guilford Press.

McAdams, D. (1990). Unity and purpose in human lives: The emergence of identity as life story. In A. Rabin, R. Zucker, & S. Frank (Eds.), <u>Studying persons and lives</u> (pp. 148-190). New York: Springer.

McAdams, D. (1995). What do we know about a person?

<u>Journal of Personality</u>, 63(3), 365-376.

Miles, M., & Huberman, A.M. (1994). An expanded qualitative data analysis: Sourcebook. Thousand Oaks, CA: Sage.

Miller, M. E. (1996). Ethics and understanding through interrelationship: I and Thou in dialogue. In R. Josselson (Ed.), Ethics and process in the narrative study of lives (pp.129-150). Newberry Park, CA: Sage.

Miller, P. (1994). Narrative practices: Their role in socialization and self construction, In U. Neisser & R. Fivush (Eds.), <u>The remembering of self</u> (pp. 158-177). New York: Cambridge University Press.

Miller, P. (1989). <u>Socialization through narrative</u>.

Paper presented at the meeting of the Society for

Psychological Anthropology, San Diego, CA.

Miller, P., Potts, R., Fung, H., Hoogstra, L., & Mintz, J. (1990). Narrative practices and the social construction of self in childhood. American Ethnologist, 17, 292-311.

Mishler, E. (1986). <u>Research interviewing: Context and</u> narrative. Cambridge, MA: Harvard University Press.

Morris, S. (1993). Designing health promotion approaches to high risk adolescents through formative research with youth and parents. Public Health Reports, 108 (Suppl.1) 68-77.

Murray, H. (1938). <u>Explorations in personality</u>. New York: Oxford Press.

Myerhoff, B. (1978). <u>Number our days</u>. New York: Simon and Schuster.

National Center of Nursing Research. (1993). Health promotion for older children and adolescents: A report of the NINR priority expert panel on health promotion.

Bethesda, MD: U.S. Department of Health and Human Services.

Nelson, J. P. (1996). Struggling to gain meaning:
Living with the uncertainty of breast cancer. Advances in

Nursing Science 18(3), 59-76.

Nichterm, S. (1992). The sociocultural and psychodynamic aspects of the acting out adolescent. Adolescent Psychiatry, 10, 140-146.

Ochberg, R. L. (1996). Interpreting life stories. In R. Josselson (Ed.), Ethics and process in the narrative study of lives (pp.97-113). Newberry Park, CA: Sage.

Osofsky, J. D. (1995) The effects of exposure to violence on young children. American Psychologist 50, 782-788.

Panel on High Risk Youth. (1993). Losing generations:

Adolescents in high risk setting. Washington, D.C.: National

Academy Press.

Pastore, D., Fisher, M., & Friedman, S. (1996).

Violence and mental health problems among urban high school students. Journal of Adolescent Health, 18(5), 320-324.

Petersen, A., Richmond, J., & Leffert, N. (1993).

Social changes among youth: The United States experience.

Journal of Adolescent Health, 14(8), 632-637.

Picard, C. (1991). Caring and the story: The compelling nature of what must be told and understood in the human dimension of suffering. In D. Gaut & M. Leininger (Eds.), Caring: The compassionate healer (pp. 89-98). New York: National League of Nursing Press.

Polkinghorne, D. (1988). <u>Narrative knowing and human</u> sciences. Albany: SUNY Press.

Polkinghorne, D. (1995). Transformative narratives: From victim to agentic life plots. American Journal of Occupational Therapy, 50(4), 299-305.

Prothrow-Stith, D. (1995). The epidemic of youth violence in America: Using public health prevention strategies to prevent violence. <u>Journal of Health Care for the Poor and Underserved</u>, 6(2), 95-101.

Prothrow-Stith, D. (1991). <u>Deadly consequences</u>. New York: Harper Collins.

Public Health Service. (1990). Healthy people 2000:

National health promotion and disease prevention objectives.

Washington, D.C.: Department of Health and Human Services.

Rawnsley, M. (1994). Recurrence of cancer: A crisis of courage. Cancer Nursing, 17(4), 342-347.

Reynolds, A. J. (1998). Resilience among black urban youth: Prevalence, intervention effects, and mechanisms of influence. American Journal of Orthopsychiatry, 68(1), 84-100.

Richters, J. (1993). Community violence and children's development: Toward a research agenda for the 1990s. In D. Reiss, J. Richters, M. Radke-Yarrow, & D. Scharff (Eds.), Children and Violence (pp 3-6). New York: Guilford Press.

Richters, J., & Martinez, P. (1993). The NIMH community violence project: I. Children as victims of and witnesses to violence. Psychiatry, 56, 7-21.

Riessman, C.K. (1993). <u>Narrative analysis</u>. Newberry Park, CA: Sage.

Rodgers, B., & Cowles, K. (1993). The qualitative research audit trail: A collection of documentation.

Research in Nursing and Health, 16, 219-226.

Rollins, J. A. (1993). Nurses as gangbusters: A response to gang violence in America. <u>Pediatric Nursing</u>, 19(6), 559-567.

Rosenberg, M. (1995). Violence in America: An integrated approach to understanding prevention. <u>Journal of</u> Health Care for the Poor and Underserved, 6(2), 103-110.

Rosenwald, G., & Ochberg, R. (1992). Introduction: Life stories, cultural politics, and self-understanding. In G.

Rosenwald & R. Ochberg (Eds.), Storied lives: The cultural politics of self-understanding (pp. 1-16). Chelsea, MI: Book Crafters.

Runyan, W. (1988). Progress in psychobiography. <u>Journal</u> of Personality, 56(1),305-322.

Runyan, W. (1990). Individual lives and the structure of personality psychology. In A. Rabin, R. Zucker, R. Emmons, & S. Frank (Eds.), <u>Studying Persons and Lives</u> (pp. 10-34). New York: Springer.

Sampson, R. J. (1997). The embeddedness of child and adolescent development: A community level perspective on urban violence. In J. McCord (Ed.), <u>Violence and childhood in the inner city</u> (pp. 31-77). Cambridge, United Kingdom: Cambridge University Press.

Sandelowski, M. (1989). Artful design: Writing the proposal for research in the naturalist paradigm. Research in Nursing and Health, 12(2), 77-84.

Sandelowski, M. (1991). Telling stories: Narrative approaches in qualitative research. Image, 23(3), 161-165.

Sandelowski, M. (1994). Notes on transcription.

Research in Nursing and Health, 17, 311-314.

Sandelowski, M., Holditch-Davis, P., & Harris, B. (1989). Mazing: Infertile couples and the quest for a child.

Image: Journal of Nursing Scholarship, 21, 220-226.

Sandelowski, M., Holditch-Davis, D., & Harris, B. (1990). Living the life: Explanations of infertility. Sociology of Health and Illness, 12(2), 195-215.

Schiefflin, B. B., & Ochs, E. (1986). Language socialization. Annual Review of Anthropology, 15, 163-246.

Schubiner, H., Scott, R., & Tzelepsis, A. (1993).

Exposure to violence among inner city youth. <u>Journal of</u>

Adolescent Health, 14(3), 214-219.

Sells, C.W., & Blum, R.W. (1996). Morbidity and mortality among U.S. adolescents: An overview of data and trends. American Journal of Public Health, 86(4), 513-519.

Sheley, J., & Wright, J. (1992). Youth, guns, violence in urban America. Washington, D.C.: National Criminal Justice Reference Service.

Simmons, D. (1994). Grounded theory. In B. Glaser (Ed.), More grounded theory methodology: A reader (pp. 1-37). Mill Valley, CA: Sociology Press.

Singer, J., & Salovey, P. (1993). <u>The remembered self:</u>
Emotion and memory in personality. New York: Free Press.

Slaby, R. G. (1997). Psychological mediators of violence in urban youth. In J. McCord (Ed.), <u>Violence and childhood in the inner city</u> (pp. 171-206). Cambridge, United Kingdom: Cambridge University Press.

Smithbattle, L. (1994). Beyond normalizing: The role of narrative in understanding teenage mother's transition to mothering. In P. Benner (Ed.), <u>Interpretive phenomenology</u> (pp. 141-166). Thousand Oaks, CA: Sage.

Stipek, D., & McCroskey, J. (1989). Investing in children. American Psychologist, 44(2), 416-423.

Staub, E. (1996). Cultural-societal roots of violence:
The examples of genocidal violence and of contemporary youth violence in the United States. <u>American Psychologist</u>, 51(2), 117-132.

Strauss, A. (1994). Qualitative analysis for social scientists. New York: Cambridge University Press.

Strauss, M. (1994). <u>Violence in the lives of adolescents</u>. New York: Norton.

Streubert, H., & Carpenter, D. (1995). Qualitative research in nursing. Philadelphia: J. B. Lippincott.

Stuhlmiller, C. (1994). Narrative methodology in disaster studies: Rescuers of Cypress. In P. Benner (Ed.), Interpretive phenomenolgy (pp. 323-350). Thousand Oaks, CA: Sage.

Takanishi, R. (1993). The opportunities of adolescence: Research, interventions, and policy. American Psychologist, 48, 85-87.

Thomas, J. (1995). Violence: Conflicts and challenges, a nursing perspective. In <u>Violence: A plague in our land</u> (pp. 49-58). Washington, D.C.: American Academy of Nursing.

Tonkin, E. (1992). <u>Narrating our pasts: The social</u>
construction of oral history. Cambridge, United Kingdom:
Cambridge University Press.

U.S. Department of Education. (1998). State nonfiscal survey: School year 1993-1994. Washington, D.C.: National Center for Educational Statistics.

Vassar, M., & Kizer, K. (1996). Hospitalizations for firearm related injuries. <u>Journal of the American Medical</u>
Association, 275(22), 1734-1739.

Wagnild, G., & Young, H. (1993). Development and psychometric evaluation of the Resiliency Scale. <u>Journal of Nursing Measurement</u>, 1(2), 165-178.

Way, N. (1998). <u>Everyday courage: The lives and stories</u> of urban teenagers. New York: New York University Press.

Wheeler, E., & Baron, A. (1994). <u>Violence in our schools</u>, hospitals, and public places. Ventura, CA:

Woodhouse, L. (1992). Women with jagged edges: Voices from a culture of substance abuse. Qualitative Health research, 2, 262-281.

Yee, B., Castro, F., Hammond, W., John, R., Wyatt, G., & Yung, B. (1995). Panel IV: Risk-taking and abusive behaviors among ethnic minorities. Health Psychology, 14(7), 622-631.