Walden Dissertations and Doctoral Studies

3-14-2024

The Experience of Grief, Coping, and Community in Black Families and Friends of Homicide Victims

Rachel A. Jenkins
Walden University

Walden University

College of Psychology and Community Services

This is to certify that the doctoral dissertation by

Rachel A. Jenkins

has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

Review Committee
Dr. Susan Marcus, Committee Chairperson, Psychology Faculty
Dr. Tracy Mallett, Committee Member, Psychology Faculty

Chief Academic Officer and Provost
Sue Subocz, Ph.D.

Walden University
2024

Abstract

The Experience of Grief, Coping, and Community in Black Families and Friends of

Homicide Victims

by

Rachel A. Jenkins

MPhil, Walden University, 2021

MA, Argosy University, 2012

BS, Westwood College, 2009

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Forensic Psychology – Concentration in Legal Issues

Walden University

May 2024

Abstract

Black families and friends of homicide victims (BFFHV) are left behind to grieve and cope with the traumatic loss of a loved one to homicide. The evidence reveals a risk of developing emotional and psychological issues for the survivors. The purpose of this study was to explore four phenomena the BFFHV experience: (a) the experience with local law enforcement and the courts during the investigation of the homicide, (b) the experience of grieving over traumatic loss, (c) the experience of coping with traumatic loss, and (d) their current relationship with the community. Heider's attribution theory was used to guide the development of the interview questions and the data analysis plan. A purposeful homogeneous sample of eight participants was recruited and interviewed. A thematic interpretative phenomenological analysis (IPA) was used to identify six unique themes: being notified/immediacy, aftershock, relationship between BFFHVs and the criminal justice system (CJS), CJS does not care, emotional relationship to the community, and life will never be the same. The development of personal (internal) and environmental (external) attributes associated with those themes described how participants' grief and coping were both internally and externally attributed. Future research can be conducted with families, including adolescents and young adults, to understand these phenomena from a family systems perspective. It is hoped that the results contribute to positive social change by improving resources to assist survivors with loss and by transforming the relationship between law enforcement and Black communities so that they no longer have to accept homicide as a part of life.

The Experience of Grief, Coping, and Community in Black Families and Friends of

Homicide Victims

by

Rachel A. Jenkins

MPhil, Walden University, 2021

MA, Argosy University, 2012

BS, Westwood College, 2009

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Forensic Psychology – Concentration in Legal Issues

Walden University

May 2024

Dedication

I dedicate my dissertation to my family. A special feeling of gratitude to my loving sister, Tiffany Boxley, for seeing what you went through losing your son to homicide, which prompted me to do this study, and to my many family members who also suffered losing a loved one to homicide, your tears and pain was always a constant reminder of how important this study was. My husband Duane, my mother Betty, and my children Shana' (Robert), Danielle, Donisha (Dayvon), and my four grandchildren Evan, Brooklynn, Brayden, and Dakota, who never left my side and encouragement me, are all a very special part of me.

Acknowledgments

I would like to express my deepest appreciation to several members of Walden University who played a major role in my success, and I would like to take this opportunity to thank them. My chair, Dr. Susan Marcus, provided me with invaluable support and unmeasurable patience. I am truly thankful for all the wisdom, guidance, and support she has given me throughout this journey.

Table of Contents

i

iii

List of Tables

List of Figures

Chapter 1: Introduction to the Study

Death by homicide is a traumatic event that is often random, sudden, untimely,

violent, unnecessary, and preventable. This life-changing event affects millions of

families and friends of the victim worldwide (Bucholz, 2002; Englebrecht et al., 2016;

Mastrocinque, 2015). Homicide and its consequences for the victims' surviving friends

and family have increased so dramatically in recent years that the resulting trauma has

become a societal problem (Johnson & Armour, 2016).

In the United States, homicide rates have increased since 2008 and are 2 to 20

times greater for Blacks than for Whites (Joseph et al., 2018; Schober et al., 2021;

Sharpe, 2015; Tilstra et al., 2022). Homicide is a significant problem contributing to

racial disparities, social challenges related to mental and psychological health issues,

crime, recidivism, joblessness, and homelessness (Metzger et al., 2015). While most of

the research has focused on quantitative estimates of the impact of homicides on the

Black community, more research is called for to explore the emotional and social

consequences of this kind of traumatic loss for Black families and friends of homicide

victims (BFFHVs). Further, these communities may not have access to the services

family members need to assist with coping and the psychological consequences of this

kind of loss.

Grieving following a traumatic loss can be a lifetime process for BFFHVs. It can

be associated with an increase in mental health issues, complicated or prolonged grief,

and chronic psychological distress. The killing of Blacks engaged in unlawful or

suspected unlawful behavior makes grief even more complex for the families and

communities (Burrell et al., 2021; Captari et al., 2020; Huh et al., 2020). Thus, it is important to understand the experiences of families and friends who were directly or indirectly involved with the homicide victim.

Chapter 1 presents the background for the current study, which summarizes the key literature on what is known about this topic. The problem statement describes how more research is needed. This is followed by a description of the study's purpose, research questions, and theoretical framework. Key terms are defined, and the study methodology is summarized. The chapter concludes with a discussion of the potential, significance, and opportunities for social change.

Background of the Study

Homicide is one of the top five causes of death, especially for people under 45 years of age. A homicide can leave many people grieving, and six out of ten left behind are considered family and friends of homicide victims (FFHVs) and BFFHVs (Englebrecht et al., 2016; Mastrocinque et al., 2015; Turner et al., 2018). FFHVs may feel ashamed and isolate themselves if society and family members feel that their loved one's lifestyle contributed to their death. FFHVs may feel they have nowhere to turn or no one to talk to, affecting their grieving and coping process (Bucholz, 2002).

This is particularly poignant for the Black community, which suffers from increasing rates of homicides across urban and rural regions (Schober et al., 2019). Racial stereotypes continue to exist in American culture regarding crime and specific groups who commit those crimes. According to White (2019), 13% of homicide victims lived in White neighborhoods, 64% of homicide victims were killed in Black neighborhoods, and

20% of homicide victims lived in Hispanic neighborhoods. These racial disparities in crime continue to perpetuate the myth that Blacks, compared to Whites, are more dangerous and violent. These statistics also contribute to how Black victimization is accepted or expected by the criminal justice system (CJS) and society. The same study described how Black victims of homicide are viewed as more deserving of being killed, whereas White victims of homicide are viewed as less deserving. Racial discrimination contributes to society's perceptions of Black homicide victims, which plays a significant role in how society and local law enforcement agencies view and respond to acts of violence in communities (Joseph et al., 2018; Lo et al., 2012).

For every homicide victim, hundreds of BFFHVs may be left behind to suffer and deal with any physical and mental injuries caused by this unnatural death (Hawkins, 2017). BFFHVs may find it more challenging to grieve and cope with their loved one's death if the violent act was committed by someone they knew, such as another family member or an acquaintance, compared to the homicide if the offender was not known or identified (van Denderen et al., 2016).

Numerous studies have studied the bereavement and grieving process over traumatic events, but there is limited research on this unique target population. BFFHVs have been overlooked in past and current literature, although the sociological and psychological literature has noted the unique stressors Black communities face during these events (White, 2019). Only recently have researchers begun to acknowledge the importance of understanding how homicide affects the bereavement, grieving, and coping process for BFFHVs, highlighting a need to understand more about the experience of

coping and grieving from their perspective (Englebrecht et al., 2016; Hawkins, 2017; Sharpe, 2015).

Problem Statement

More studies are needed to understand the unique issues BFFHVs experience with local law enforcement and the courts during the investigation of the homicide and to gain a better understanding of the experience of grief and coping with BFFHVs regarding the traumatic loss. Additionally, to hear how BFFHVs describe their current relationship with local law enforcement agencies, the courts, and communities should understand how certain factors associated with socioeconomic status and racial and structural disparities can contribute to how BFFHVs express grief and cope with the traumatic loss of a loved one due to homicide.

A study by Baker et al. (2019) indicated that BFFHVs viewed their grief as being misunderstood by society and the criminal justice and how they should minimize their grief and move on with their lives after the homicide. In their study, Stewart (2017) discussed that law enforcement agencies view socioeconomically disadvantaged neighborhoods with high crime rates as bad areas with disproportionate violence and victimization. Also, regarding the relationship between crime and race, Black victims of homicide are viewed as more deserving of being a victim of homicide, whereas White victims of homicide are viewed as less so (White, 2019). BFFHV parents indicated that they believed that being socioeconomically disadvantaged is the reason why they were treated unfavorably by the CJS and local law enforcement agencies compared to White

parents of homicide victims, contributing to the concept that Blacks are more deserving of being victims of homicide than Whites (Baker et al., 2019).

Homicide continues to be the leading cause of death for young Black males, and that rate continues to exceed males from other ethnicities (Ezell, 2019). Various research studies discussed the importance of establishing the appropriate resources, support, services, interventions, and programs for BFFHVs to help them deal with and manage their grief (Sharpe, 2015; Joseph et al., 2018). Those same studies indicated that services should be explicitly tailored to meet the needs of the individual affected by homicide (e.g., age, culture, gender, sibling, and parent; Joseph et al., 2018; Sharpe, 2015). Current statistics in the United States are uncertain of the accurate number of individuals directly affected by homicide (Mastrocinque et al., 2015). However, research shows that homicide is more likely to be committed by young adult Black males living in areas with a higher rate of violence that may advocate violence to resolve personal conflict (Bartol & Bartol, 2017; Mastrocinque et al., 2015).

This research study was framed in a way that allowed me to build upon previously published literature and explore issues relative to BFFHV's perspective by filling a void left by other research studies. Namely, it provided a better understanding of how homicide affects the BFFHV's grieving and coping process and how it affects their relationship with local law enforcement, the courts, and their community after losing a loved one to homicide.

In summary, the research on homicide in Black communities points to the need for more research to better understand the grieving, coping, and community regarding the

experience of BFFHVs. In addition, numerous research studies suggest that there is a gap in the literature regarding the importance of establishing appropriate resources, services, interventions, and support for BFFHVs needed to assist them in dealing with and managing their grief and mourning the death of their loved one (Joseph et al., 2018; Sharpe, 2015). Current and past research has suggested a definite need for mental health professionals and physicians to understand how homicide can cause an adverse reaction affecting BFFHV's cognitive and emotional behavior compared to normal reactions and responses associated with grief and loss surrounding natural causes of death (Mastrocinque et al., 2015).

This research study is relevant to the field of forensic psychology because research conducted in different disciplines—sociology, psychology, and social science—found a difference among certain groups associated with dehumanization, hostility, and prejudices against BFFHVs regarding homicide (White, 2019). As a result of the lack of comprehensive support groups and services, BFFHV may struggle to process their loved one's death and may experience different stages of grief: first, realizing their love is dead; second, trying to accept the loss; third is shock, denial, isolation, and feeling stuck, fourth is sadness and depression, and finally accepting to live without their loved one (Bucholz, 2002; Joseph et al., 2018; Sharpe, 2015; Vincent et al., 2015).

Establishing policies and procedures could assist mental health professionals and physicians with identifying any emotional and psychological issues resulting from a homicide. By receiving training, those professionals would be able to identify any psychological and emotional symptoms those family members may be experiencing as a

result of the homicide, which may provide a better understanding to the courts, local law enforcement agencies, and the communities as to why BFFHVs are still grieving the loss. (Mastrocinque et al., 2015; Sharpe, 2015).

Purpose of Study

The purpose of this phenomenological study was to explore how BFFHV grieve and cope with the traumatic loss of their loved ones, their relationship with local law enforcement agencies and the courts during the homicide investigation, and the communities. This research study was framed in a way that allowed me to build upon previously published literature and explore issues relative to BFFHV's perspective by filing a void left by other research studies. Namely, by providing a better understanding of how homicide affects the BFFHV's grieving and coping process and how it affects their relationship with local law enforcement, the courts, and their community after losing a loved one to homicide.

Research Questions

RQ1: How do BFFHV describe their experience with local law enforcement and the courts during the investigation of the homicide?

RQ2: How do BFFHV describe the experience of grieving over traumatic loss?

RQ3: How do BFFHV describe the experience of coping with traumatic loss?

RQ4: How do BFFHV describe their current relationship with the community?

Theoretical Framework for the Study

The theoretical framework for this study was based on the attribution theory first coined by a psychologist, Fritz Heider. Heider's (1920, 1925) explanation of attribution

was the first of many causal theories about perception, describing a causal link between the properties of objects, the properties of perceptions of the objects, and how they interact (Malle & Ickes, 2000). Heider called this process "attribution" and considered it essential for understanding how to modify behavior. Subsequently, the study of attribution became an important part of cognitive functionalism and social psychology (Malle & Ickes, 2000; Weiner, 2008). Two types of attributional processes, internal and external (e.g., Heidegger, 1958), were explored in this study so that individuals with these attributions could be studied closely. Specific incidents or events caused by other people's behavior can affect how an individual reacts or copes with a specific event or situation.

The framework of attribution theory and the theoretical lens of interpretative phenomenological analysis (IPA) were used to assist me with understanding the participant's worldview and experiences and how my personal experiences, values, influence, and pre-understanding of the phenomena (e.g., double-hermeneutics approach).

Nature of the Study

A qualitative study was appropriate for this research study because it allowed me to understand how the participants experienced the homicide and the meaning they attribute to the homicide itself, the experience with the criminal investigations, their own grieving and coping, and their relationship with the community. This qualitative study used Smith et al.'s (2012) IPA to understand the raw data. Using IPA allowed me to study the participants' experiences, interpret data, form assumptions, ideas, and principles

regarding the effects that homicide had on BFFHV's grieving and coping with a traumatic loss, and then move beyond the descriptive data by applying the significance, then make sense of what was found by explaining, formulating a conclusion, and then describing the meaning of the studied problem (Patton, 2015; Peoples, 2021). The purpose of this research study was to explore how BFFHVs, in their own words, describe their experience with local law enforcement and the courts during the investigation of the homicide and how they grieved and coped with the traumatic loss. In order for local law enforcement agencies, mental health professionals, and communities to understand better why these individuals may not be able to move forward with their lives.

Definitions

Bereavement is an emotional feeling that one may experience after a loved one's death (VandenBos, 2009).

Complicated grief, formerly known as prolonged grief disorder, is the development of psychological, emotional, and mental health issues, such as posttraumatic stress disorder [PTSD] or depression, due to the sudden and unexpected death of a loved one (Joseph et al., 2018).

Complicated mourning occurs when the death is sudden, violent, and could have been prevented (Englebrecht et al., 2016).

Coping is a cognitive-behavioral strategy that assists with managing or dealing with specific situations (VandenBos, 2009).

Coping strategy is a thought process used to deal with specific actions or a series of stressful or unpleasant actions (VandenBos, 2009).

The criminal justice system (CJS) is a system that prescribes the fate of the criminal, a system that provides compensation to victims under the law, a system that seeks to defer crime by establishing penalties for criminal conduct, and a system that seeks to rehabilitate (Cornell School of Law, 2020).

Disenfranchised grief is violating the mourner's right to grieve (Huggins et al., 2020).

Persistent complex bereavement disorder is a persistent yearning and longing for a loved one, an intense feeling of sorrow and emotional pain associated with being consumed by the circumstances surrounding a loved one's death (American Psychiatric Association, 2013).

Traumatic loss is considered a sudden and violent death, and it may include multination, is unnecessary, and could have been prevented (Bucholz, 2002).

Traumatic grief or pathological grief involves attachment behaviors, separation, and traumatic distress (Bucholz, 2009). Bucholz (2009) described the criterion for traumatic grief for individuals whose loved one was a victim of homicide: their behavior is intrusive, they experience intense sorrow and pain, constantly thinking of their loved one, cannot focus on anything else, fixates on events that remind them of their loved ones, and develop intense longing or languishing over their love.

Assumption

According to a study conducted by Alves-Costa (2018), violent deaths can produce bereavement distress, producing a severe emotional response that may last for several years, which is why additional research studies need to be conducted on this

phenomenon to promote provisions for public policy, support, and services for those families that lost a loved one to the act of homicide. This study assumed that the participants are sense-making individuals; therefore, the interpretation they provide will describe how they attempted to make sense of their experience. This study assumed that the participants could describe how the homicide negatively affected their experience with local law enforcement and the courts during the investigation of the homicide, how they grieved and coped with a traumatic loss, and their current relationship with the community. Homicide is considered a different type of crime that is an unnatural, violent, and intentional act or event in nature and produces different emotions and reactions outside of the natural reaction of experiencing losing a loved one to causes other than homicide (Bucholz, 2009; Hawkins, 2017; Huggins & Hinkson, 2020; Johnson & Zitmann, 2020; Viers, 2007).

Losing a loved one to homicide is experienced differently from losing someone involved in a fatal car accident or a medical or terminal illness; whether the death was natural or unnatural, it still affects how an individual grieves and copes with losing a loved one. Suppose BFFHVs are not provided or do not receive adequate support or resources. In that case, they may continue to struggle with processing and accepting their loved one's death, which can contribute to psychological and emotional issues. This study also assumed that there is no comprehensive way to address the effects of homicide regarding grieving and coping with the traumatic loss because every individual responds, processes, and deals with stressful situations or events differently.

Scope and Delimitations

The specific goal of this study was to explore how BFFHVs grieve for their loved one who was a victim of homicide from their perspective. Hopefully, this study provided a better understanding of why establishing policies and procedures within the local law enforcement agencies, and courts is essential in providing BFFHVs with adequate resources and services needed to assist with grieving and coping with a traumatic loss process and ways to move forward with their life, without their loved one present. (Mastrocinque et al., 2015; Sharpe, 2015). This study included additional research studies that discuss how homicide is the leading cause of death for Black males, how homicide leaves numerous individuals behind to grieve, how homicide affects family and friend's grieving process, and how homicide may contribute to psychological and mental health issues, used in the literature review of BFFHVs. However, there is still a definite need for support, resources, and mental health services for BFFHVs, which is not adequately addressed in current or past literature.

The inclusion population selection criteria for this study consisted of eight participants, 18 years of age or older, Black (male, female), a family member (e.g., parent, siblings, spouse, grandparent), and friends who lost a loved one to homicide between 1 and 5 years prior to their participation in the study in order to minimize psychological risk. The exclusion criteria were individuals who are not Black, under 18 years of age, have not lost a loved one to homicide, and the homicide is less than one year old. This study did not include individuals who had lost a loved one due to a terminal illness, motor vehicle, or accidental death. The exclusion occurred respectfully at the

initial phone call or email when I asked participants to affirm that they met the criteria for inclusion. Grieving a homicide is different due to the circumstances and nature of homicide, which can severely affect the grieving and coping process for those family members trying to make sense of the murder of their loved ones (Huggins & Hinkson, 2020).

Limitations

While this study assisted with examining how these friends and family members grieve and cope after a traumatic loss, there is an inherent limitation of a qualitative study. I did not use random sampling in this study, and the study only reflected the experiences of a small sample population of BFFHVs.

In order to improve transferability, I included the inclusion and exclusion criteria, interview length, and the data collection's geographic location for this research study. Content from my journal provided context and details of the data collection and data analysis process, as well as the results. I did not interpret how my findings generalize to other ethnic groups.

A potential barrier to this research study was the time it might take BFFHVs to recover from the traumatic effects of homicide. According to the U.S. Department of Justice (2013), it can take an individual 18 to 24 months to stabilize from death other than in homicide, but with homicide, it can take BFFHVs much longer to stabilize. In order to overcome that potential barrier, I did not approach participants whose loved one was killed within a year. A challenge that I did not encounter is having a clear separation between being a Ph.D. researcher and my role of being a secondary victim and co-

survivor due to my experience of losing a loved one to homicide and still being able to maintain a clear separation and avoid taking sides. A reflective section was added to minimize any potential bias I may have developed regarding my worldviews, support, local law enforcement agencies, and the courts surrounding my loved one's death by keeping a journal throughout the interview process.

Significance

Burrell et al. (2021) conducted a qualitative study discussing how the event of homicide impacts BFFHV's well-being, producing a lasting impact on their grieving and coping process, how they deal with homicide, and how homicide can produce issues that may diminish their psychological or emotional response. This study examined the shared impact that homicide has on BFFHV's bereavement and grieving processes. It offered new insights into how homicide can negatively impact (a) how it impacted their experience of interacting with the local law enforcement agencies and the courts, (b) how it impacted how they grieved and coped with a traumatic loss, and (c) how it impacted their relationship with the community. Due to the adverse effects that homicide has on BFFHVs, identifying preventive factors could prove essential in establishing the appropriate support, resources, and interventions. In order to effectively create social change, input is needed from the local law enforcement agencies, the courts, and communities to effectively create, promote, and develop a plan for change for BFFHVs directly affected by homicide. Hopefully, this study will impact social change by shedding light on the lived experience of this overlooked population within the United States. I created a summary of the study and findings to distribute to participants and the

organizations who posted the invitations. I submitted a proposal to present my findings to local organizations (e.g., Baltimore City Survivor and Everytown Survivor Network, which focus on families who have experienced gun violence).

This study used literature and research from different disciplines on the issues associated with homicide, family, friends left behind, grieving and coping, local law enforcement, the courts, racial disparities, victimization, disfranchised grief, and psychological and emotional distress issues. The selected literature assisted with exploring how homicide affects BFFHV's interactions with local law enforcement agencies and courts during the homicide investigation, how they grieved and coped with the traumatic loss, and their relationship with the community.

By conducting interviews with BFFHVs, I explored how homicide has affected this population from their perspective through their lived experience. This study aims to bring awareness, address the needs of those family members who lost a loved one to homicide, and identify and develop adequate support and services to assist with grieving and coping with the traumatic loss of losing a loved one to homicide. Homicide affects millions of people in the United States differently, and some may require only support, understanding, and acknowledgment from their families and friends. In contrast, others may require some form of mental health services. By contributing to the existing body of knowledge, this research will provide the research community, local law enforcement agencies, courts, the mental health profession, and the communities with a broader understanding, through the lived experiences of BFFHVs, of how homicide affected them

directly, may have contributed to psychological and emotional issues effecting how they move forward with their lives.

Summary

Death is an unavoidable human experience, and at some point in our lives, we will grieve the loss of a loved one, which is a natural human experience. Regardless of how a loved one dies, some individuals may develop complicated grief associated with the loss. Complicated grief produces stress associated with physical and emotional distress and can be confused with an individual suffering from a major depressive disorder. Grieving the loss of a loved one is a natural experience, often unrecognized or not a significant concern to mental health professionals or society. In contrast, complicated grief associated with homicide also goes unrecognized or ignored by society due to the lack of information, training, and knowledge associated with not understanding the effect that homicide had on the family members of the murdered victim.

This study aimed to document and provide a detailed account by describing how homicide has affected BFFHV's relationship with local law enforcement agencies and the courts during the homicide investigation, how they grieved and coped with the traumatic loss, and their current relationship with the communities. Chapter 2 presents a detailed summary of the research on the phenomena of coping and grief with the loss of a loved one, locating it specifically in the context of the Black community. The research design and methodology are phenomenological, which will be thoroughly explained and justified in Chapter 3. This research study is a way forward in understanding how

complicated grief affects the grieving process for BFFHVs. More research is needed to provide a better understanding of this phenomenon.

Chapter 2: Literature Review

According to the Federal Bureau of Investigation (2018) Uniform Crime Reporting Program, an estimated 16,214 murders were committed in 2018, which decreased by 6.2% from a report in 2017. The U.S. CJS designates two levels of homicide: first-degree and second-degree, which include voluntary and involuntary manslaughter (Bartol & Bartol, 2017; Siegel, 1992). Those same studies defined first-degree murder as the unlawful killing of one human being by another, including malice, sudden or planned, and deliberate. Second-degree murder is the unlawful killing of another that is unplanned, does not include malice, and is not deliberate. Homicide is a sudden and traumatic life-changing event, and the circumstances surrounding that loss can profoundly affect the survivors. Researchers have consistently pointed out that most people adjust to the traumatic loss with the help of friends and family members and professional services (Botelho & Goncalves, 2016; Johnson & Zitman, 2020; Mastroccinque et al., 2015; Merriam & Tisdell, 2016; Metzger et al., 2015). However, the sudden and violent loss of a family member puts the BFFHVs at greater risk of developing complicated grief, PTSD, and certain illnesses, as well as increases the risk of suicide (Baguley et al., 2020; Joseph et al., 2018; Lee et al., 2020; Pahl et al., 2020; Reed et al., 2016). Homicide among young Black males is the fifth leading cause of death in this population (Sheats et al., 2018). Thus, losing a loved one to homicide is particularly poignant for Black families and friends.

There is a growing body of research on how homicide survivors grieve and heal (Baguley et al., 2020; Higgins et al., 2020; Johnson & Armour, 2016; Johnson &

Zitmann, 2020, 2021; van Denderen et al., 2016). BFFHVs try to seek out various ways to help them cope with the death of their loved one through spiritual coping, social support, collective coping, and concealment; regardless of their socioeconomic background, the majority seek support from Black churches following the homicide to try to make meaning surrounding the traumatic and sudden death (Huggins, 2017; Lee et al., 2020). However, less attention and research have focused on the longer-term bereavement experiences of BFFHVs. As reported above, Black homicide deaths are more frequent on average, leading to personal vulnerability and unique stressors that contribute to the lifecycle of emotional and psychological issues affecting the health, well-being, and grieving process of BFFHVs (Umberson, 2017). Research has suggested that BFFHV's grieving and coping process is severely impacted by the homicide, leading to increased visits to emergency rooms, community health clinics, primary physicians, and mental health services used as a safety mechanism to help them deal and cope with the sudden and traumatic loss of their loved one (Das et al. 2021). The purpose of this research study was to explore the lived experience of BFFHVs with local law enforcement and the courts during the investigation of the homicide, how they grieved and coped with the traumatic loss, and their current relationship with the community.

In this chapter, I review the relevant literature on how BFFHVs interacted with local law enforcement during the homicide investigation, how they grieve and cope with a traumatic loss, and their interactions with the community. This chapter begins with a discussion of the strategies used to search the literature on this topic and the theoretical

framework of attribution theory. I then present a review of the extant literature on the key concepts in the study.

Literature Search Strategy

One database used to search for articles for this literature review was PsycINFO, which contains a list of credible and reliable American Psychological Association resources within the research community. PsycINFO contains scholarly journal articles and abstracts, books, book chapters, and dissertations and has significant holdings of peer-reviewed literature for behavioral and mental health professional database searches. I also searched the PsycARTICLES database for full-text, scholarly, peer-reviewed journal articles in the field of psychology. Additional databases searched included EBSCO, ProQuest, and Science Direct, which included a full-text database offering journal articles and book chapters from peer-reviewed journals. The keywords searched were *coping, murder, homicide, grief, death, families, survivors, friends, bereavement, co-victims, mental health services, programs, dealing, support, racial and structural disparities, race, the criminal justice system, policing,* and *policies.* The parameters set for my searches were articles published from 2016 to the present. Some of the articles included in the literature review were older because they also provided relevant context and seminal findings.

Theoretical Framework

The study's theoretical framework was based on the attribution theory first coined by a psychologist, Fritz Heider. Heider's (1920, 1925) explanation of attribution was the first of many causal theories about perception, describing a causal link between the

properties of objects, the properties of perceptions of the objects, and how they interact

(Malle & Ickes, 2000). Heider called this process "attribution" and considered it essential

for understanding how to modify behavior. Subsequently, the study of attribution became

an important part of cognitive functionalism and social psychology (Malle & Ickes, 2000;

Weiner, 2008). According to Weiner (2008), Heider viewed any event, action, or

occurrence as a reason to search for causes (i.e., attributions). Heider used the term "self-

starter" regarding the initiation of attribution-related issues and pointed out differences

between individuals' perceptions of objects and their explanations of the object's

behavior (Malle, 2008). The diagram in Figure 1 demonstrates the organization of the

basic concepts of attribution theory.

Figure 1

General Model of the Attribution Field
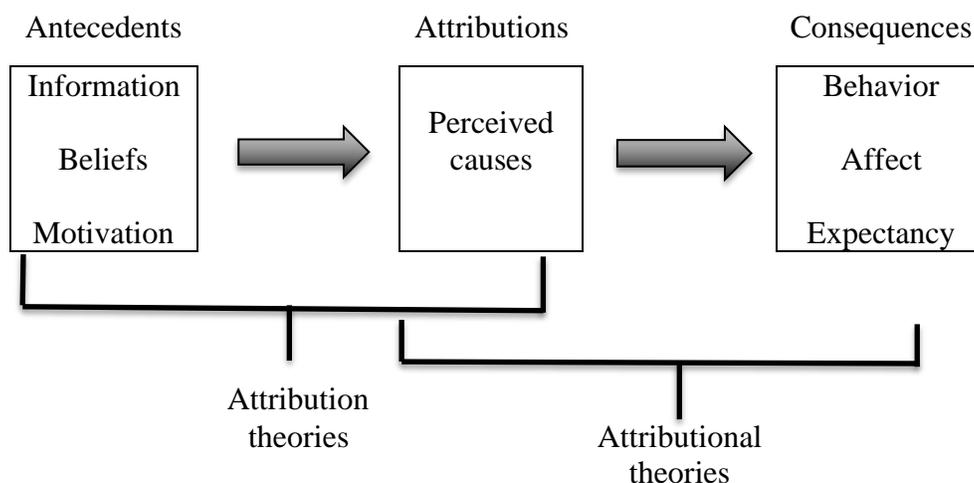
Note. Adapted from "Attribution Theory and Research," by H. H. Kelley and J. L.

Michela, 1980, *Annual Review of Psychology, 31*, p. 459

(https://doi.org/10.1146/annurev.ps.31.020180.002325).

Kelley and Michela (1980) provided a seminal description of a general module attribution field regarding how antecedents, attributions, and consequences are connected, linking considerable research to various aspects of the attribution model. Kelley and Michela also described that causal attributions could have a significant role in human behavior and represent the individual's understanding of the causal structure of their world, which can be an important factor in their interaction with the world. Individuals may interpret behaviors based on the causes, which can be important in determining their reactions and how it affects their behavior attribution, affecting how an individual feels about a past event or situation, expectations regarding future events or situations, attitudes toward another individual, reactions regarding their behavior, conceptions of themselves, and their effort to improve their future. When an individual's actions are considered intentional, they are viewed differently. According to Heider (1958), if an individual takes responsibility or ownership of their actions, they are viewed as having a positive outcome, regardless of their actions being intentional versus unintentional, and a negative outcome still produces blame when done intentionally (Kelley & Michela, 1980).

According to Thomson (1997), internal attributes are how an individual's behavior or actions are based upon that individual, while external attributes relate to how individuals attribute their behaviors or feelings to a specific situation or incident outside of themselves (i.e., environmental). An example would be that if a person stumbled, I would attribute their behavior to carelessness; if I were to stumble, I would attribute it to the unevenness of the sidewalk.

Harvey and Weary (1984) discussed current attribution theory and research issues, proposing that attribution attempts to understand certain factors that may contribute to an individual's perceived causation and foci of attribution conceptions, including multiple perceptions, such as the perception of responsibility and freedom. According to these authors, recent work in the area of attribution can be viewed as causes or basic processes underlying attributions and consequences of attribution categories. Attributions are associated with two categories: antecedents (i.e., information, belief, or motivation), which are associated with attributions (i.e., perceived or cause), and consequences (i.e., behavior, affect, or expectancy).

There is a possible link between information and attribution having multiple processes. Kelly and Micheal (1980) discussed that logical analysis (i.e., noncommon effects, covariation) includes a broader set of information and a sizable number of causal explanations, how consequences and explanations are used to justify certain events or situations even if the information is not analyzed before an individual processes information; and may continue without some preexisting influences, suppositions, and expectations.

It should be noted that attributions have also been the subject of intense study in philosophy. Heidegger (1962), a theologian and philosopher whose main interest was ontology (i.e., the study of the being), worked closely with Husserl (1920), who was considered the father of phenomenology and described a phenomenon through an individual lived experience of the studied problem (Creswell & Poth, 2018; Peoples, 2021). Heidegger (1958) proposed that an individual could have two types of attributions

(i.e., internal and external) and how specific incidents or events caused by other people's behavior can affect how an individual reacts or copes with a specific event or situation. This proposition was particularly relevant for my study because it was used to explore how families grieving and coping with a traumatic loss attribute their ability or inability to move from their grief. Related to the present study, in this theory, Heidegger suggested that the causes (i.e., attributes) that affect how BFFHV grieve and cope with a traumatic loss may compel them to react to their loved one's death differently than reacting to the loss of a loved one that died of natural causes.

The philosophy of phenomenology focuses on how individuals intentionally and directly experience and describe their world (i.e., that their world is subjectively constructed; Heidegger,1958; Husserl, 1927; Smith et al., 2012), which is referred to as the "lived experience" (Smith et al., 2012, pg. 1-3). As an in-depth examination of the human experience, phenomenology focuses on the meaning of those experiences and how individuals interpret the meaning of those experiences (Smith et al., 2012). This philosophical approach was particularly appropriate to use to consider how grieving Black families find meaning after losing a loved one to an event such as homicide.

Research Applications of Attribution Theory

Attribution theories have been applied to a wide variety of research study topics. Most relevant are the studies that have examined crime attributions about criminal acts and racial attributions and studies that focus on the experience of grief and loss.

The study of crime attribution and external attributions has been shown to influence the interpretation of criminal behavior; that is, how the ultimate "causes" of

behavior are attributed to personal responsibility and/or attributed to events that

individuals have no control over (i.e., lack of resources and education, unemployment,

neighborhood; Updegrove et al., 2020). According to a study conducted by Peffley et al.

(2017), Blacks and Latinos may attribute similar disparities and racial discrimination

associated with how they were treated by local law enforcement and racial attribution of

racial inequalities of socioeconomic status were associated with societal attributions

regarding why Blacks are more impoverished than Whites.

For example, Updegrove et al. (2020) collected data from 350 randomly sampled

Philadelphia residents to examine whether attributing crime to an individual or

environmental causes influenced the choice of punitive or progressive legal policies.

Updegrove et al. found that the participant's race influenced crime attributions,

specifically that Blacks supported progressive criminal justice policies more than Whites

did. The researchers discussed how external attributions contribute to reasons for

engaging in criminal behavior, financial gain, lack of control, or mental and behavioral

issues, and others may blame attributions on their environment, situational attributions, or

events that they have no control over, such as societal issues, lack of resources,

unemployment, their neighborhood, or lack of education (Updegrove et al., 2020).

Peffley et al. (2017) conducted a study in the United States using the Washington State

Survey collected in 2012 and comparing three groups, Latinos, Blacks, and Whites,

regarding how attributions (i.e., internal/dispositional versus external/systemic

explanations) of racial disparities in the CJS may influence their punitive support of

crime policies regarding underrepresented groups. Peffley et al.'s study revealed that

Blacks and Latinos attributed disparities in police treatment to racial discrimination more so than White participants and that racial attributions regarding policies to restore racial inequalities of socioeconomic status were associated with citizens' attributions of why Blacks are more impoverished than Whites.

Attributions have also been studied in the research on loss and grief to describe how individuals make meaning of their loss. Researchers have suggested that by applying a goal-oriented attribution approach, individuals may find strategies to make meaning of their loss, which may assist with their grieving process and help them develop ways of coping and dealing with their loss (Smid, 2020; Stein et al., 2009). By applying causal attribution, individuals may also find forgiveness towards the perpetrator who caused the death of their loved one (Lichtenfeld et al., 2019).

For example, Smid (2020) utilized the framework of meaning attribution after a loss to study how meaning attribution could have favorable and unfavorable effects on the bereaved individual's functioning and grieving process. Smid found that meaning attribution is attributed to how an individual experiencing a loss combines their life events, identifies change, and develops a new perspective on life and that meaning attributions, after an individual experiences a loss, is an adaptive process that could assist the bereaved with becoming a new individual, allowing them to tell their stories to others and themselves.

Stein et al. (2009) collected data from 111 young adults. They examined whether goal-oriented attributions were used to make meaning of their loss experience and its impact on their personal goals and religious beliefs. They found that goal-oriented

attribution could be attributed to how an individual copes with the associated loss, and their religious belief could reflect how an individual attempts to find meaning when facing trauma and loss. Stein et al. described how goal-oriented attribution, after a trauma or a loss, is associated with how individuals find strategies to make meaning of the loss and how those strategies associated with religion assisted them with coping and dealing with a traumatic event.

Lichtenfeld et al. (2019) collected data on emotional forgiveness from 969 participants, whether attributions are linked to forgiveness and the decision-making process that may strongly influence subsequent attributions. They found that forgiveness causes lower levels of responsibility attributions, with a causal relation of forgiveness on responsibility attributions, and that individuals who are asked to forgive are emotionally substantially different in their cognitive processes (e.g., responsibility attributions) compared to decisional forgiveness and control condition, which is the difference between emotional and decisional forgiveness. Emotional forgiveness was also found to drive the effect on attributions in that emotions are the core of changing one's behavior, cognition, and feelings in interventions and therapies regarding causal attributions associated with forgiving the perpetrator.

In summary, attribution theory was beneficial in understanding how individuals move through grief and towards coping with loss. A goal-oriented attribution approach has been applied to previous studies of loss and grief to describe how individuals make meaning of their loss. Researchers have suggested that by applying a goal-oriented attribution approach, individuals may find strategies to make meaning of their loss, which

may assist with their grieving process and help them develop ways of coping and dealing with their loss (Smid, 2020; Stein et al., 2009). By applying causal attribution, individuals may also find forgiveness towards the perpetrator who caused the death of their loved one (Lichtenfeld et al., 2019). Furthermore, research has demonstrated that racial disparities in attributions occur due to differences in socioeconomic and societal injustice conditions (Peffley et al.,2017; Updegrove et al., 2020). The research on the attribution of criminal behavior and the grieving process points out that the attributional process may underlie the experience of being a family or friend of a homicide victim.

Application to the Study

I used attribution theory to guide the development of the interview guide questions (see Appendix A) and the data analysis plan for this study. This theory has particular relevance both methodologically and specifically to the phenomenon of interest. Methodologically, IPA was used to get to the cause or core of an individual's lived experience of the phenomenon in the individual consciousness by describing it as eidetic reduction, moving from the consciousness to describe the phenomenon more vividly in the individual's own words and how they attributed or make sense of situations, events, and relationships in which they find themselves involved (Smith et al., 2012). Furthermore, attribution theory guided the development of the interview questions regarding participants making meaning of their experiences and interactions with local law enforcement and the courts, grieving and coping with a traumatic loss, and their current relationship with the community.

Literature Review Related to Key Concepts

Studies on FFHVs have suggested a relationship exists between the traumatic loss of a loved one due to homicide and the development of complicated grief, depression, and maladaptive coping (Baguley et al., 2020; Englebrecht et al., 2016; Sharpe, 2015; Thiel, 2015). Numerous studies have described how remaining family members are considered co-survivors, how they are at risk for developing mental health issues, and the lack of services to address their unique issues (Metzger et al., 2015; Turner, 2018; Vincent et al., 2015). Those studies also mentioned the lack of empirical research that explores the experiences of the family and friends left behind. In the first part of this review, I addressed the larger socioeconomic and social injustice factors contributing to mental health risks of Black families who experience the loss of a family member due to homicide. I followed this with a review of previous studies of the psychological processes regarding grieving a traumatic loss, unresolved grief, and coping. BFFHVS are constantly trying to make sense of their loved one's sudden and untimely death, which encourages them to mourn in private, leading to the development of complicated mourning (Baker et al., 2019; Daka, 1989; Englebrecht et al., 2016).

Homicide in the Black Community

Homicide is a significant problem for the Black community; between 1981 and 2006 in the United States, homicide was the leading cause of death for individuals under the age of 35 and the leading cause of death for Black males between the ages of 15 years of age and older (Bartol & Bartol, 2017; Berthelot et al., 2016: Schober et al., 2021). Edward et al. (2021) discussed that Blacks comprise 13% of the population in the United

States and account for 50% of homicide victims. However, the numbers could be even higher than reported, leaving between seven to ten survivors, such as family members, friends, coworkers, and neighborhoods, behind.

Homicide in the United States is likely to occur in socioeconomically disadvantaged neighborhoods where young males promote or accept violence as a means to solve conflicts or disputes (Hawkins, 2017). Furthermore, local law enforcement agencies and the courts view the victims and perpetrators of homicide in those neighborhoods as playing a part in their own victimization and death (Hawkins, 2017; Sheats et al., 2018; Smith & Patton, 2016). Black families may find it challenging to relocate from high-crime neighborhoods due to a lack of resources and financial support and are likely to become victims of homicide. Children in those neighborhoods develop defense mechanisms as a means to survive, which can lead to emotional issues and PTSD as well as be associated with anxiety, depression, mental development, and behavior issues (Berthelot et al., 2016; Burrell et al., 2021; Diehr et al., 2018; Hawkins, 2017; Joseph et al., 2018; Lee et al., 2020).

In a quantitative study in urban neighborhoods in 30 cities in the United States from 2008 to 2012 and 2013 to 2017, Schober et al. (2021) found that the rate of homicide was higher in urban racially segregated Black neighborhoods and were perceived as more dangerous and aggressive. They discussed the mortality rate of homicide associated with racial disparities, how the mortality rate for Blacks was higher than non-Hispanics and Whites, and how the homicide rate was 22.2 per 100,000 for

Blacks, 5.4 non-Hispanics, and 2.8 for Whites, concluding that Blacks made up the

majority of homicide victims (Schober et al., 2021).

Institutional Racism

Baily et al. (2021) reported that there is no clear definition of structural racism or

systemic and institutional racism, but several definitions have been considered. Most are

consistent with the understanding that structural racism and disparities have historically

been embedded and allowed within the CJS, society, and socioeconomic institutions that

once served to maintain social control over Blacks by passing laws and policies that

affected services, support, and resources provided to Blacks living in disadvantaged

communities (Das et al., 2021; Stewart et al., 2017; Umberson et al., 2017; Unnever et

al., 2021). Structural discrimination condones or encourages residential segregation when

surrounding Black neighborhoods are labeled violent areas with a high crime rate (Das et

al., 2021; Umberson, 2017). Biases regarding such communities contribute to whether

those neighborhoods receive community support or resources (Baily et al., 2021;

Umberson, 2017)

In their study, Stewart et al. (2017) discussed racial disparities and how Dubois

(1903) predicted that racial issues would continue to be problematic well into the 20th

century. In the United States, racial issues continue to be a problem. The National Pew

Research Center (2016) found that 71% of Blacks reported experiencing racism,

discrimination, and mistreatment compared to 30% of Whites (Hetey & Eberhardt, 2018).

Racial biases in the United States perpetuate the myth that Black men threaten the social

order based on their hyper-masculinity, perceived aggressiveness, and alleged

participation in gang activities (Johnson et al., 2019). Black men reported experiencing

racial disparities at some point in their lives during an encounter with the CJS or local

law enforcement, which continues to be a public concern and has recently forced society

and the CJS to take a closer look at the treatment of Black men (Johnson et al., 2019;

Stewart et al., 2017). Blacks who experience racism and discrimination sometimes cannot

distinguish between what is worse, institutional racism or prejudice (Hetey & Eberhardt,

2018).

Black Families' Interaction With Local Law Enforcement and the Courts

Sharpe's (2015) literature review identified many studies describing how

BFFHVs view local law enforcement as standoffish, indifferent, uncaring, or insensitive

when identifying the body of their loved one during the homicide investigation. Families

reported that they were provided inadequate information, felt revictimized when

collecting personal belongings, and felt officers were more concerned with assisting the

perpetrator (Bucholz, 2002; Connolly et al., 2015; Reed et al., 2016; Tasker, 2021). In

their 2021 study, Tasker used Braun and Clark's (2006) thematic analysis to identify

themes described by BFFHVs who lost a sibling to homicide and how they viewed local

law enforcement agencies after their death. Tasker themes revealed that most siblings

were satisfied with local law enforcement personnel when they displayed a commitment

to justice and a genuine concern for humanity. Pizzaro et al. (2020) in their study found

that police perceptions of Black victims and their community regarding the homicide

clearance rates may contribute to the attributable devaluation of Black victims, which

negatively affects the homicide investigation, resulting in mistrust of the police and CJS within those communities.

Homicide as Traumatic Loss for the Families

Traumatic loss can be defined as the loss of a loved one due to a traumatizing event or circumstance, causing a disturbance in how an individual grieves, contributing to the development of PCD and PTSD (Boelen et al., 2017; Neria & Litz, 2004). For example, Edwards et al. (2021) reviewed 20 empirical studies of survivor homicide in the black community from 2000 to 2020 and, in their review, defined the experience as a traumatic loss. Boelin et al. (2017) included survivors of homicide victims as experiencing a traumatic loss. Wilson et al. (2023) discussed Intergenerational trauma and explained how the emotional and psychological pain of historical trauma that African Americans experienced as the result of racialized violence is multidimensional and passed down from generation to generation.

All these studies and others have described how such loss can create complicated and prolonged grief, including intense emotions such as shock, rage, fear, horror, guilt, shame, feelings of isolation, and losing control, which can affect how they grieve and cope with the traumatic loss (Englebrecht et al., 2016; Johnson & Armour, 2016; Smith & Patton, 2016; Spilsbury et al., 2017).

The Unique Experience of Grief in Homicide

According to VandenBos (2009), grief can be defined as an emotional feeling of anguish experienced after a significant loss due to a loved one's death. The phenomenology of the unique experience of grief in homicide can be ambiguous

depending on BFFHV's ability to cope with and accept the meaning of the traumatic death of their loved ones (Fuchs, 2018; Smid, 2020). BFFHVs may be at risk of developing disenfranchised grief, grieving for their loved one in silence, and isolating themselves from other family members if their death was not accepted by their family members, local law enforcement agencies, the courts, and the community (Baker et al., 2019; Englebrecht et al., 2016).

Fuchs and Smid discussed how ambiguous loss exists in Western cultures and that grief is connected with how FFHVs process and accept the death of their loved ones, described as breaking bonds. According to Fuchs (2018), when that bond is broken, FFHVs remain strongly connected to their deceased loved ones, and that continued connection between the presence and absence produces a conflict between presenting and de-presenting intentions, prolonging their grieving and coping process. FFHVs have a particularly unique experience with their grieving process regarding saying goodbye, coming to terms with the cause and consequences of their loved one's death, and facing the reality that their loved one is not coming back (Smid, 2020).

Coping With a Traumatic Loss

Coping is a cognitive behavior strategy that individuals use to manage and deal with certain stressful situations to reduce the development of adverse emotions caused by an event or situation (VandenBos, 2009). There has been considerable research on how people cope with the loss of a loved one.

Huggins (2017) found that BFFHVs sought out various ways to help them cope with the death of their loved ones through spiritual coping, social support, collective

coping, and concealment. Bailey et al.'s (2013) qualitative study identified four themes regarding ways that Black mothers tried to use to cope and make meaning regarding the senseless murder of their child. The themes reflected the profound difficulty in coping. The first theme (the murder of their loved one) reflected the struggle of viewing their loved one's death as having meaning and a purpose. The second theme (spiritual belief) described the work to believe that death was God's plan. The third theme (honoring their loved ones by becoming an activist) was an expression of support to other family members whose loved one was a victim of homicide. The fourth theme (trying to find new purpose and meaning) reflected the struggle for meaning in the absence of their loved one (Bailey et al., 2013).

BFFHVs may be unable to grieve and cope with the traumatic loss of their loved one's death and have recurring dreams wondering if their loved one suffered, whether there is anything they could have done to prevent it from happening, and if they should have been able to save them (Connolly, 2015). Coping is difficult, as FFHVs reported suffering and experiencing memory loss, problems focusing, sleep deprivation, no interest in daily activities, and avoidance issues, especially activities that remind them of their loved ones (Spilsbury et al., 2017). Research has also identified negative coping strategies, as FFHVs may self-medicate by abusing drugs and alcohol (Lee et al., 2020; McDevitt-Murphy et al., 2021). McDevitt-Murphy et al. (2021) conducted a cross-sectional study of 54 African Americans and found that alcohol abuse disproportionally affected African Americans and how alcohol abuse contributed to higher rates of PTSD, complicated grief, and depression.

The event of homicide has a lasting impact on how BFFHVs grieve, cope, and deal with the unnatural act of homicide, contributing to issues that diminish their psychological or emotional response (Burrell et al., 2021). Many factors affect how BFFHV grieve the death of their loved one, such as medical treatment, mental health services, support from other family members, local law enforcement agencies, the courts, and their relationship with the deceased (Edward et al., 2021). Establishing support groups consisting of other family members who lost a loved one to homicide is identified as an essential coping mechanism because it has the potential to create an environment where other BFFHVs feel comfortable and safe and can express how the traumatic and sudden death of their loved one, has affected their grieving and coping process. In their findings, Baker et al. (2019) discussed that social identity surrounding the homicide and BFFHVs experiences with society contributed to why those family members are still grieving, unable to move forward, and unable to let go of their loved ones. It may take an individual 18 to 24 months to stabilize from death other than in homicide, but with homicide, it can take much longer for the individual to stabilize (Baker et al., 2019; Burell et al., 2021). Interestingly, most of this literature focuses on the first year of grief, not the long-term consequences.

In their scoping review, Edwards et al. (2021) pointed out how BFFHV's grieving process can be affected by the interaction with the investigation of the homicide. They noted research that described how local law enforcement agencies, the courts, and communities could blame the victim for being responsible, reducing the ability of law enforcement to compassionately interact with BFFHVs (Baker et al. 2019).

BFFHVs and the community of those who lost a loved one to homicide can experience secondary victimization because of their knowledge that it could have been their loved one who was murdered for no apparent reason (Bucholz, 2002; Reed et al., 2016). BFFHVs may not be aware of any services appropriate for dealing with their grief (Edward et al., 2021; Schober, 2021). In order for local law enforcement agencies, the courts, schools, churches, and community organizations to provide adequate support for BFFHV, more research is called for to better understand the effect that homicide has on those family members left behind trying to grieve, cope, and make sense of losing a loved one to homicide, in order to provide the appropriate support (Botelho & Goncalves, 2016).

Summary and Conclusion

The selected literature review for this research study conveyed the history of homicide, BFFHVs grieving and coping process, interaction with the CJS and local law enforcement agencies, any support received, and racial and structural disparities. Homicide is a violent act that produces feelings of shock, disbelief, guilt, shame, and fear and forces the family members left behind to develop a new perspective and outlook on life, trying to make sense of the killing of their loved ones (Englebrecht et al., 2016; Lee et al., 2020).

As a way of coping with the traumatic loss, those family members may begin to abuse drugs and alcohol, which contributes to them being at a higher risk of developing anxiety and depression, PTSD, depression, anger, and complicated grief, which are

symptoms that manifest as a result of the homicide (Baguley et al., 2020; Englebrecht et al., 2016; Spilsbury et al., 2017).

At some point, every individual will experience the death of a loved one, will grieve, and hopefully be able to move forward with their life. The death of a loved one may also become challenging for anyone grieving the death regardless of how their loved one died; natural illness or cancer or unnatural causes, homicide, manslaughter, car crash, or suicide will be painful. However, the traumatic grief associated with death by homicide affects BFFHV's grieving, coping, and bereavement process, with the risk of becoming unmanageable (Bucholz, 2009; Hawkins, 2017; Johnson & Zitmann, 2020; Viers, 2007).

Black men's interaction with the CJS and local law enforcement has been a public concern for decades, and only recently have research and social institutions begun to address these issues (Johnson et al., 2019; Lo et al., 2012). Unfortunately, racial disparities continue to be documented in cities throughout the United States and the CJS regarding how Blacks experience racism more frequently than Hispanics and Whites (Das et al., 2021; Hetey & Eberhardt, 2018). Those racial disparities continue to perpetuate the myth that Blacks, compared to Whites, are more dangerous and violent, and due to those racial stereotypes, race shapes how their victimization will either be accepted or expected by the CJS and society (Berthelot et al., 2016; White, 2019). Young Black men carry the disproportionate burden of experiencing different types of violence, are more likely to fall victim to homicide than Hispanics and Whites, especially those

living in urban areas, and are at a greater risk of becoming victims and perpetrators of homicide (Berthelot et al., 2016; Schober et al., 2021; Sheats et al., 2018; White, 2019).

Numerous studies on the different levels of grief associated with a homicide only focused on the participant's response to homicide, not how homicide affected their coping and grieving process. Current and past literature discussed the importance of additional research needed to fully understand how homicide affects those family members left behind, trying to make sense of their loved one's death, that can contribute to the development of appropriate services and resources (Baker et al., 2019; Bloomberg & Volpe, 2016; Englebrecht et al., 2016; Hawkins, 2017; Sharpe, 2015). Without BFFHVs receiving adequate support in dealing with the death of their loved ones, it may diminish their worldview of local law enforcement agencies and the courts, their sense of security, and their perception that people are good (Bucholz, 2002). In Chapter 3, I explain the methodology I used to conduct a qualitative study to describe how BFFHVs make meaning, in their own words, of the events associated with losing a loved one to homicide. Hopefully, this study will contribute to greater awareness of this societal problem and the personal challenges of the family and friends left behind.

According to the U.S. Department of Justice (2013), support groups should be established consisting of other family members who experienced a similar loss, which will allow them the freedom to disclose their interaction with local law enforcement agencies and the courts during the homicide investigation, how they grieved and cope with a traumatic loss and their current relationship with the community. The prior section describing the history of policing as an institution is beneficial to understanding how the

U.S. law enforcement agencies and the courts affect BFFHV's experience during the homicide investigation and grieving and coping with the traumatic loss of their loved ones. (Baily et al., 2021).

BFFHVs may experience traumatic or distributed grief, exhibiting emotions of fear, shame, anxiety, anger, confusion, instability, and somatic disorders, which occur when an individual cannot grieve normally for their loved ones, which can force them to grieve in silence, isolate themselves, and avoid events that remind them of their loved ones (Huggins & Hinkson, 2020).

BFFHVs are already traumatized by the unexpected and senseless murder of their loved ones and may find themselves interacting with the media, criminal system, and law enforcement. Those relationships may lead to re-traumatization for those individuals, forcing them to relieve their loved one's death, which could affect how they grieve and cope with the traumatic loss, possibly leading to the development of complicated grief (Huggins & Hinkson, 2020). Suppressing or concealing their grief is not uncommon for BFFHVs, especially if they have other family members who depend on them (Huggins & Hinkson, 2020). In order to determine what support and resources are effective in assisting BFFHVs, a study needs to be conducted from their perspectives describing their experience of losing a loved one to homicide, how it affected their interactions with local law enforcement agencies and the courts, grieved and coped with the traumatic loss (Bucholz, 2002). In the next chapter, I review the research design and procedures for conducting a qualitative study to contribute to a better understanding of this phenomenon.

Chapter 3: Methodology

The purpose of this study was to explore the lived experience of BFFHVs experience with local law enforcement and the courts during the investigation of the homicide, how they grieved and coped with the traumatic loss, and their current relationship with the community. The methodology was IPA (Smith et al. 2012). In the first section of this chapter, I restate the research questions, discuss the phenomenon being investigated, discuss the research methodology chosen for this study, my role as a researcher, and any personal biases regarding the phenomenon of homicide, also any ethical issues and how I planned to address those and reflexivity. In the methodology section, I describe the target population and the methods for the participant selection by providing a rationale for the choice, including the number of participants and how they would be identified, contacted, and recruited. I explain the interview process and describe the data collection methods and the data analysis plan. The methodology section concludes with an explanation of trustworthiness, including credibility, transferability, dependability, confirmability, and ethical procedures.

Research Design and Rationale

The research questions for this study were as follows:

RQ1: How do BFFHV describe their experience with local law enforcement and the courts during the investigation of the homicide?

RQ2: How do BFFHV describe the experience of grief over traumatic loss?

RQ3: How do BFFHV describe the experience of coping with traumatic loss?

RQ4: How do BFFHV describe their current relationship with the community?

Primary Phenomena

Four primary phenomena were explored. The first was the interactions with local law enforcement and the courts during the investigation of the homicide, which I explored as questions about "what happened": the notification, the interactions with police, the courts, and related services. As BFFHVs, the participants may have a unique perspective on the people and the systems designed to protect and assist them (Hetey & Eberhardt, 2018; Johnson et al., 2019; Stewart et al., 2017).

The second phenomenon explored was grief. It was explored as questions about the grieving process, the ability to move on, and making sense of loss. This concept shared by Fuchs (2018) and Smid (2020) is that grief is connected to the presence and absence of how BFFHVs process and accept the death of their loved ones, described as breaking bonds, attachment, remaining connected to their loved ones, and if that bond is broken, it produces a conflict between presenting and de-presenting intentions prolonging the grieving process.

The third was coping. I explored this phenomenon as questions of "how": the coping process and the ability to accept and move on with their lives. Considerable research has described the consequences of poor coping in BFFHVs, including memory loss, problems focusing, sleep deprivation, no interest in daily activities, avoidance issues, especially activities that remind them of their loved one, and the development of negative coping strategies such as self-medicating by using drugs and alcohol (Lee et al., 2020; McDevitt-Murphy et al., 2021; Spilsbury et al., 2017). The intent was to "listen for" coping strategies that are nourishing and positive as well.

The fourth phenomenon explored was the experience with the community after the loss, which I explored as questions about "what happened" (i.e., support or services received, resources offered, and mental health services accessed). Communities (e.g., schools, churches, support groups, and hospitals) that may have a limited understanding of the effects of losing a loved one to homicide contributed to the establishment of inadequate services currently provided (Denderen et al., 2016; Diehr & McDaniel, 2018; Metzger et al., 2015).

Rational for the Phenomenological Tradition

The IPA was selected for the research methodology because it allowed me to study the participant experiences, interpret the data, and form assumptions, ideas, and principles regarding the experience of loss for Black FFHVs (Peoples, 2021). IPA was the method used to focus the research on phenomena experienced by specific individuals who share this experience and how they make meaning of those experiences (Pietkiewick & Smith, 2014; Smith et al., 2009).

As described in Chapter 2, attribution theory was the theoretical framework. Two types of attributional processes were discussed (e.g., Heidegger, 1958), such that an individual could have two types of attributions: internal and external. Specific incidents or events caused by other people's behavior can affect how an individual reacts or copes with a specific event or situation. Pietkiewicz and Smith (2014) discussed hermeneutics (i.e., to interpret or make clear) as the researcher needs to understand the participant's mindset and language of how they describe and attribute (i.e., make meaning) an event or situation in order to understand and report their experience. In IPA studies, the researcher

has an active role in accessing participants' lived experiences and making sense of and describing the participant's world, which is a double hermeneutic process (Pietkiewicz & Smith, 2014).

I also considered a narrative study approach because it would have assisted in understanding how BFFHVs describe, in their own words, how the homicide has affected them through telling the storytelling of the event, which is the focal point of a narrative analysis, which is why I did not choose this approach (Creswell & Poth, 2018). By utilizing a narrative approach, I would have been concerned with how each participant told a story of losing a loved one to homicide and how it affected them over time by telling a story from the beginning, middle, and end. However, this study aimed to understand the phenomena of interest from an attributional perspective, which is much more consistent with IPA.

Role of the Researcher

The role of a researcher conducting qualitative research is to focus on the perceptions and views of the participants in this research study by providing an understanding and interpretation consistent with the phenomenological and interpretative aspects of IPA (Smith et al., 2009). By conducting this qualitative study, I became an active listener, empathized with the participants being studied regarding their worldviews, and understood that my biases could affect what was learned (Rubin & Rubin, 2016). It also required me to wear multiple hats, as an observer and an interviewer, during this research study. This qualitative study allowed me to interpret the views of others based on their worldview and their lived experiences and not my own. In

this qualitative study, I was also a participant, interviewer, and observer in the semi-structured interview, using the interview questions as a guide.

In my multifaceted role as the researcher, I faced the challenges of personal bias influencing the instrument development, data collection, analysis, and interpretation, as I was both the researcher and an instrument used in this qualitative study. To minimize this limitation, during the data collection and analysis, I conducted ongoing reflection by utilizing a journal throughout the interview process and utilizing other well-regarding qualitative strategies described below (Shenton, 2004).

One challenge I faced as a researcher for this study was being a BFFHV due to having lost a loved one to the violent act of homicide. Another challenge was that my prior experiences with local law enforcement agencies and the courts and my beliefs could be harmful and influence the participant's interview response or cloud my judgment of the interpretation of the participant's response and themes that may emerge. I addressed these issues by carefully reflecting on how my culture, beliefs, and life experience might affect how I view and interpret certain situations from my personal experiences. I strived to clearly understand my role as the researcher in this qualitative study and separate it from being a participant to eliminate any potential biases. I stayed focused on the participants. I documented my thoughts, emotions, and actions in a reflexive journal and kept an audit trail of my interviews and data analysis process (see Shenton, 2004).

This research study used the framework of attribution theory and the theoretical lens of IPA to assist me with understanding the participant's worldview and experiences

and how my personal experiences, values, influence, and pre-understanding of the

phenomena (e.g., double-hermeneutics approach). I recruited participants through the

posting of the invitation and various social media platforms. I informed participants that

their participation was strictly voluntary and that a $25 Visa gift card would be provided

as compensation for their participation in this study, regardless of how much the

interview was completed or whether they decided to withdraw from this study.

Methodology

Participant Selection Logic

The population of interest for the study was defined as Black adults (male,

female) over 18 years of age, family members (e.g., parents, siblings, grandparents,

spouse), and friends who lost a loved one to homicide between 1 and 5 years prior to this

study. Homicide is defined as murder, nonnegligent manslaughter, and the willful killing

of one individual by another (Bureau of Justice Statistics, n.d.). The criteria for inclusion

were Black adults (male or female) who have lost a family member (e.g., parents,

siblings, grandparents, spouses) or friend(s) who lost a loved one between 1 and 5 years

ago.

I used a purposeful sampling strategy to recruit individuals from the District of

Columbia (DC), Maryland, Virginia, and Illinois, using invitations and referrals. I

included a homogeneous sampling via the inclusion criteria on the invitation to enhance

the possibility that all participants share similar experiences, which is consistent with

IPA. I also used snowball sampling, asking the participants to pass on my invitation to

those they may know, such as someone who lost a loved one to homicide. Homogeneous

sampling is recommended for phenomenological studies (Patton, 2015), and Pietkiewicz and Smith (2014) a recommended sample size of six to eight individuals for an IPA study, as this approach is concerned with in-depth explorations of how individuals make meaning and sense of the world, which means that participant experiences regarding the shared experience can be explored, and the meaning they attributed to the experience.

To ensure that participants met the inclusion criteria, I identified several nonprofit organizations whose mission is to support individuals, families, and friends of homicide victims. These included the Roberta's House, Baltimore, Maryland; Chicago Survivors, Chicago, Illinois; The Wendt Center for Loss and Healing, Washington, DC; Maryland Attorney General Victim Services Office; Homicide Survivors and Thrivers; and Parents & Families of Homicide/Suicide Victims Support Group (Facebook) I contacted them to request that they post an invitation to their members and constituents to participate in the study. I use snowball sampling by asking participants to pass on my invitation to those they know who meet the inclusion criteria. Individuals reading the invitation contacted me if they were interested in participating. Identification of the participants meeting the inclusion criteria occurred once individuals reached out to me via phone and/or email on the invitation. Verification occurred via self-report during the initial contact.

Data saturation occurred when no new information was identified or little to no change in coding or categories was produced (Guest et al., 2006). I examined the data as each participant was interviewed to ensure that rich, thick interview data was achieved. I attempted thematic saturation by maximizing the opportunities for rich, thick, and

complete descriptions of the phenomena in question and examining thematic patterns within and across cases.

Instrumentation

This study utilized a semi-structured interview format consisting of questions guided by the literature review to explore the lived experience of participants who self-report as FFHVs. The open-ended questions elicited information about the participant's experience. The interview questions were derived from the attribution theory and the literature identified in Table 1 and described in detail in Chapter 2.

Table 1

Interview Guide and Supporting Citations

Questions and probes	Sources
Tell me about what happened to your (family member or friend). What happened? (probe for when the homicide happened)	Baker et al. (2019); Bartol & Bartol (2017)
Where were you during the event? After?	Berthelot et al. (2016); Burrell et al. (2021)
What do you remember about hearing about what happened when you first heard?	Ferrito et al. (2017); Stewart et al. (2017)
What was the experience of hearing the news like for you?	Joseph et al. (2018); Viers (2007)
What did that mean to you?	Bucholz (2019); Durosini et al. (2017)
How did you find out? How were you notified?	
What was your experience like with the local police (whoever?) when you were notified? Can you give me an example? What did that mean to you?	Brantingham & Uchida (2021); Hetey & Eberhardt (2018); Johnson et al. 2019); Vincent et al. (2015)
Is there anything else you would like to share about how you felt or what it meant when you first got the news?	
We will move on to talk about what happened in the investigation of the homicide. Can you tell me what happened?	Brantingham & Uchida (2021); Unnever et al. (2021)
Did you speak with the police? Or investigators? What was that like?	Edwards et al. (2021); Reed et al. (2016)
What was your experience of that/those interactions? Can you give me an example?	Bucholz (2002)
What did those interactions mean to you?	Sharp (2015)
Were you notified that they had someone in custody? If so, how? Can you tell me what happened?	Sheats et al. (2018)
What was that like for you?	
Did you speak with anyone regarding the trial? Prosecutors? Victim Advocates? What was that like?	Hetey & Eberhardt (2018)
What was your experience of that/those interactions? Can you give me an example?	Connell et al. (2015)
Is there anything else you would like to share about your interactions with the police and the courts?	
We will move on to talk about your grief and how you are feeling now. Tell me about your grieving experience. What was the most difficult part? What is grieving like for you now? Can you give me an example?	Baguley et al. (2020); Fuchs (2018); Huggins & Hinkson (2020); Mastrocinque et al. (2015); Turner et al. (2018); Smid (2020); U.S. Department of Justice (2013)

Questions and probes	Sources
How do you share your grieving with the people around you? (probe: family, friends) How do they feel about your grieving experience? Is there anything else you would like to share about your grieving process?	Alves-Cost et al. (2019); Englebrecht et al. (2016)
Now, we are shifting from the grief process (the emotions and feelings of loss) to how you cope, like what you did and how you sought help. Can you share something about your coping?	Bailey et al. (2013); Boelen et al. (2017); Neria & Litz (2004).
Can you describe how you cope? Can you give an example? What is this like for you? Some people find healthy coping methods (e.g., exercising or volunteering at an organization). While others may find unhealthy coping methods (e.g., using alcohol or drugs or withdrawing from your every day or favorite activities.). Can you tell me about your coping strategies?	Huggins (2017); Johnson & Armour (2016); Johnson & Zitmann (2020); Lee et al. (2020); McDevitt-Murphy et al. (2021)
What kind of services have you received to help you cope? How helpful are those services?	Das et al. (2021); Joseph et al. (2018); Schober (2021)
Is there anything else you would like to share regarding grieving or coping with your loss?	
We will move on to talk about your current relationship with the community after the traumatic loss. Can you tell me what that is like for you? How would you describe your community and the people in your community?	Edward et al. (2021); Hawkins (2017); Johnson et al. (2019)
Who in your community reaches out to you? Churchs? Schools? Community Services/Programs? What was that like? What have you experienced in your community's response to your loss? Can you give me an example?	Baily et al. (2021); Das et al. (2021); Denderden et al. (2016); Diehr & McDaniel (2018); Metzger et al. (2015); Umberson (2017)
What was your experience of that/those interactions? Can you give me an example?	Light & Ulmeer (2016); Lo et al. (2013)
Is there anything else that you would like to share about your loss, your grief, or how you cope? Because of your experiences, is there anything you would recommend to others who are going through this terrible loss?	

Procedure for Recruitment, Participants, and Data Collection

I contacted relevant organizations to recruit participants by seeking permission to

place an invitation in their facilities. Those organizations consisted of support groups and

societies (e.g., Roberta's House, Baltimore, Maryland; Chicago Survivors, Chicago,

Illinois; and Wendt Center for Loss and Healing, Washington, DC).

When potential participants contacted me, I explained the criteria for inclusion,

and they will have the opportunity to affirm by self-report. Then, I explained the

procedures for this study and reviewed the informed consent process for each participant.

I then requested their email address to send them the Consent Form to review, and if they

agreed, I asked that they email me back with the words "I consent."

At this time, I planned to schedule the interviews. I offered them the choice of a

phone or Microsoft Team interview and reminded them that the interview would be

recorded but would not be shared with anyone other than my committee. I let them know

that a thank-you gift of $25 will be provided regardless of whether the interview is

completed. I also encouraged them to find a quiet and private place during the interview

time. I let them know that the interview would take about one and that they could stop at

any time.

At the end of the interview, I briefly reviewed the questions and their answers as a

member check and sent them a summary of the transcribed interview to their email for

them to review.

The data collection procedure consisted of interviewing the participants,

transcribing the audio recording after the interview, and following up with the

participants for accuracy and clarification. After reviewing the notes taken during each interview, the audio recording was transcribed for accuracy using an inductive coding technique used to compare concepts found between the participants and identify common themes that describe their grief and coping process (Creswell & Creswell, 2018). The audio recording of the interviews allowed me to achieve credibility throughout this research study by listening to the recording as often as I saw fit to avoid missing any information that may be important to the study.

Data Analysis Plan

Recorded interviews were transcribed using Microsoft Teams and Microsoft Word, and the transcribed files were password-protected, with all identifying information removed, which was only shared with the committee. This study's data analysis plan began with reviewing information taken from the semi-structured interview recording. First, I summarized the information in the codebook and notes taken from a journal used during the interview to write additional relevant information. The data was coded, categorized, and sorted to clarify themes. Then, followed Smith et al.'s (2009) six-step method, which is the leading representative of IPA. This six steps method is described by Smith et al. (2009) as;

1. Read and re-read the data and listen to the audio recording.

2. Begin noting anything that is of interest in the transcription.

3. Develop emergent themes through what was learned in the note-taking process.

4. Begin charting out how the themes might fit together.

5. Move to the next participant's transcript and start the process over.

6. Create a chart or table to compare themes (e.g., how they may be connected or different and how themes can clarify a different case.

I did not utilize NVivo, a qualitative data analysis software program, to assist with this study's coding methods with PDFs, audio, and graphic files (Saldańa, 2015). Instead, the data analysis was transcribed by hand and placed into a Microsoft Excel and Word Document. The research data was stored using an electronic file (e.g., Excel, Word).

<div align="center">**Issues of Trustworthiness**</div>

The method criteria are vigorous in qualitative and quantitative studies when determining the trustworthiness of the research findings. For this qualitative study, I was able to apply different strategies and methods to deal with issues regarding the validity and reliability of this research study by utilizing four criteria: Creditability, transferability, dependability, and confirmability are the four significant elements used to establish trustworthiness in a research study (Shenton, 2004)

Credibility

Credibility was attended to by accurately describing the participants' lived experiences regarding the phenomenon being studied (Bloomberg & Volpe, 2016). To appropriately capture how the participants construct their reality and meaning-making of how they now view the world, I worked to build rapport with the participants and advised them that they could opt out of this research study at any point. During this research process, I used a journal to document my experiences and bracket them from the meanings described by participants. I sent the participants a summary of the transcribed

interviews to review for accuracy. Finally, I detailed the context and process of data

collection and analysis process, as guided by IPA methodology, to maintain transparency

(Bloomberg & Volpe, 2016; Shenton, 2004).

Transferability

Transferability is somewhat similar to external validity, yet qualitative research

does not intend to generalize this study's findings to other populations that may have

been previously studied. However, the process and results could inform and be insightful

to the reader (Bloomberg & Volpe, 2016; Merriam & Tisdell, 2016). I included the

inclusion and exclusion criteria, interview length, and the geographic location of the data

collection for this research study. Content from my journal provided context and details

of the data collection and data analysis process, as well as the results.

Dependability

The key to ensuring dependability in this research study is to provide as much

detailed information as possible through the interview transcription, coding of the data,

and developing themes to draw similar conclusions as a result of the interviews

(Bloomberg & Volpe, 2016; Shenton, 2004).

Confirmability

Credibility was achieved by accurately describing the participants' lived

experiences regarding the phenomenon being studied (Bloomberg & Volpe, 2016). To

appropriately capture how the participants construct their reality and the meaning-making

of how they now view the world, I worked to build rapport with the participants and

advised them that they could opt out of this research study at any point. During this

research process, I journaled to document my experiences to bracket them from the make meanings described by participants. I sent a summary of the transcribed interviews for participants to review for accuracy. Finally, I detailed the context and process of data collection and analysis process, as guided by IPA methodology, to maintain transparency (Bloomberg & Volpe, 2016; Shenton, 2004).

Ethical Procedures

Before starting the recruitment process for participants and the data collection for this research study, I submitted an application to obtain approval from the Walden University Institutional Review Board (IRB), approval number 03-02-23-0608143.

My first ethical obligation as a researcher was to do no harm to the participants and try to keep any promises that were made. My second ethical obligation is to the readers and the research community to report my findings honestly, thoroughly, and fairly (Rubin & Rubin, 2016). The IRB's primary purpose is to protect the rights and welfare of human subjects used in a research study conducted under its authority. Because participants have suffered significant trauma, I was clear about how they will be recruited, how I obtained their consent to participate in this study, and to avoid causing any potential harm to the participants involved in this study (Rubin & Rubin, 2016).

Additionally, I did my very best to minimize causing unnecessary stress or harm caused by this study by not pushing the participants during the interview but allowing them to disclose as much or as little detail as they were comfortable with sharing. This study aimed to obtain as much detailed information from the participants as possible regarding the phenomenon without forcing them to disclose it. I also provide each

participant with recommended resources (e.g., Substance Abuse and Mental Health Services Administration (SAMHSA) – Crisis Lifeline, 1-800- 662-4357) if they need to speak with a mental health professional.

I obtained informed consent from each participant by emailing them the information content and instructing them to email me back an acknowledgment that they have read the informed consent and affirm that they would like to participate in this study. After discussing the informed consent with the participants in a language they can understand and after reviewing the informed consent, the recorded semi-structured interview began if they are still interested in participating in the research study. Before each semi-structured interview, I informed each participant that the interviews would be audio-recorded. I explained the potential risk to the participants associated with revisiting the sensitive nature of losing a loved one to homicide. Confidentiality was maintained throughout this study by de-identifying all the participants' personal information. I will maintain all data collected from the research study for five years. After five years, electronic files will be permanently deleted from my computer. All printed materials will be shredded and disposed of securely. I ensured that the participants' information was kept confidential throughout this study by de-identifying all the participant's personal information and reporting results in such a way that no individual participant could be identified. The participant's demographics (e.g., gender, years from the date of homicide) were deidentified and summarized to prevent the readers from deducing any individual participant's identity. It will be stored and secured in a safe location at the researcher's

residence. This research was not anonymous because I was in direct contact with the participants.

No personal authority or financial gain will be involved in this research study. Therefore, there is no conflict of interest, even though there may be a conflict of interest regarding academic gain and scholarships, and I will not benefit from this study. This research study was not to prove a theory or a hypothesis, but I remained objective throughout this study to avoid any conflict of interest, and I worked closely with my committee members to review the research study to avoid any noticeable conflict of interest. I informed the participants of any academic gain that I may receive from this study. Providing the information mentioned above to the participants assisted them with determining if there was a potential risk regarding a conflict of interest that should be discussed before they participated in the study.

Summary

This research study was a qualitative phenomenological study. This phenomenological study explored the lived experiences of Black family and friends of homicide victims (BFFHVs) who experienced losing a loved one due to homicide. Because of the need for rich, detailed information regarding BFFHVs, IPA was the methodological approach used, and the rationale was provided. The rationale for choosing a qualitative method was that it allowed me to understand this social problem from the perspective of being a BFFHV.

A sample size of eight to ten participants was recruited. The semi-structured interviews were conducted via Microsoft Teams or telephone calls with the participants.

The interviews were audio-recorded and transcribed by reviewing the notes in my journal to ensure that nothing was missed or any important information that the participants may have provided. After that, I immediately transcribed the audio recording. I analyzed the interviews utilizing IPA developed by Smith et al., 2012. From the semi-structured audio-recorded transcribed interviews, common emerging themes were combined and described in a structured descriptive texture during the data analysis. A journal was used to record my thoughts, any assumptions, and emotions that I may have experienced while analyzing and interpreting the data collection.

Addressing issues of trustworthiness was achieved through multiple strategies, reflexivity, rich and thick descriptions, and an audit trail. Any ethical issues regarding the participant's well-being were protected and approved through the Walden University IRB; informed consent and confidentiality will be maintained by utilizing a numeric system, and any PII information was stored in a secure area.

Chapter 4: Results

The purpose of this phenomenological study is to explore how BFFHV grieve and cope with the traumatic loss of their loved ones and the courts, local law enforcement agencies, and the communities. The central research question that led the study was, "How do BFFHV describe their experience with local law enforcement and the courts during the investigation of the homicide?" The sub-questions included:

- How do BFFHV describe their experience of grieving over traumatic loss?

- How do BFFHV describe their experience of coping with traumatic loss?

- How do BFFHV describe their current relationship with the community?

This chapter includes a description of the setting and demographics of the participants. Any changes to the data collection process described in Chapter 3 are reported. The data analysis process is described along with the results of my efforts to enhance trustworthiness. The results of the data analysis are presented and summarized.

Setting

Each of the interviews were conducted virtually on Microsoft Teams, allowing the participants to be comfortable in the setting of their choice. There were no personal or organizational conditions that influenced the participants or their experience at the time of study that may have influenced the interpretation of the study results. The scheduling of the interviews went well; only three participants were unavailable for their original interview date and time but rescheduled their interviews. There were no changes in settings as described in Chapter 3.

Demographics

Three male participants and five female participants between the ages of 25 and 45 were recruited for this study. Participant 1's mother was stabbed to death, while the other seven participants lost loved ones due to gun violence. Table 2 shows the eight participants, their region, their relationship to the homicide victim, the years since the homicide occurred, and what caused the homicide.

Table 2

Participant Demographics

Participant	Region	Victim's relationship to participant	Years since homicide	Cause of death
1	East Coast	Mother	2	Stabbing and beaten by husband
2	Midwest	Son	5	Gunshot by an acquaintance
3	Midwest	Great nephew	7	Gunshot by a White police officer
4	East Coast	Husband	6	Gunshot by sister's boyfriend
5	East Coast	Sons (two)	4, 3	Gunshot by a stranger/ gunshot by an acquaintance
6	Midwest	Brother	4	Gunshot by a stranger
7	East Coast	Brother	5	Gunshot by a stranger
8	East Coast	Boyfriend	7	Gunshot by an acquaintance

Participant Narrative Summaries

A brief summary of each participant's narrative is presented below to provide an understanding of each person's unique experience. While the intent of this research is to explore the shared experience of grieving and support, it was noted that the events that qualified each participant to be in the study were unique. All of these homicide events are tragic regarding the loss of human life and the consequences for the survivors.

The mother of P1 was fatally stabbed by her husband 2 years prior to this study, and P1 was the person who found the body. She described how she immediately started

screaming in disbelief, shock, and denial. She indicated feeling stuck and had to stay with

the body for an hour until someone picked her up. Her interactions with local law

enforcement and detectives "felt weird," she described her dissatisfaction with the state's

attorney. She stated that these interactions and the police responses were influenced by

race, as the perpetrator was a White male and her mother was Black; she explained, "a

plea deal was offered for a lesser sentence, but he did not accept." In preparing for trial,

she did not receive any communications about the court proceedings and had no

interaction with Victim Advocacy regarding providing support or resources to assist her

and her siblings. She described experiencing panic attacks in the weeks after the

homicide and was able to find resources and services on her own, which was The House

of Ruth. Also, a GoFundMe website was started to help pay for the funeral, as her mother

had no life insurance policy. To cope, P1 used breathing practices and other techniques

on a regular basis.

The son of P2 was fatally shot by an acquaintance 5 years prior to this study. She

was at work when she was notified about the homicide, dropped the phone, and started

screaming and running. She described communicating with the detective at the scene

through a phone call, and permission was given to a close friend to identify the body. She

provided her number to the detectives regarding information about who allegedly had

killed her son but never received a phone call or updates about the case. She discussed

how upset she was: "I was five hours away, I could not help him, and I did not have a car.

I should have been there for him and followed up with the detectives." P2 reported that

she had no interaction with the Victim Advocacy, received no service, and no one

reached out to provide resources or support to her, his siblings, or his children to help with grieving and coping. Her cousin helped locate financial resources to pay for the funeral, as her son did not have life insurance. When asked how she coped with the homicide, she indicated that she just stayed in the house and cleaned, slept a lot, and had no desire to go anywhere. She stated, "I guess that's how I cope, and I found myself drinking every single day being in the house."

The great-nephew of P3 was fatally shot by a White police officer 7 years prior to her participation in this study. She described receiving a call telling her that he had been shot and rushed to the hospital. She mentioned having no interaction with police or detectives; no one was there to meet them, and her nephew was transferred to the county morgue before they could see him. She stated, "I immediately felt something was wrong; red flags went up." She felt that because her great-nephew was shot by a White male police officer, the police department or detectives did not reach back out to her regarding what happened and how she learned what happened from the news. She said, "It was incorrect." P3 mentioned that they had no interaction with the Victim Advocacy and that no resources for her family members were offered because a police officer murdered him. She mentioned that she was able to find resources and services, trauma therapy, and other support groups for family members whose loved one was killed in a police officer-involved shooting.

The husband of P4 was fatally shot by his sister's boyfriend 6 years prior to this study. When asked how she was notified, she indicated that her cousin came to her house and told her, but no one from the police department or detectives notified her. She

explained, "I did not believe it, so I called my father-in-law, and it was confirmed." She described going to the hospital, and only the hospital chaplain was there to say, "sorry for your loss." She recalled how she became distraught, trying to process the death; "What am I going do? I have two small children." She described her outrage and dissatisfaction with officials for not communicating with her. She also discussed how she did not hear from her husband's family regarding the court proceedings and was not informed about the plea deal offered to the perpetrator. She stated, "It felt like they had cut my throat." She mentioned that she had no contact with Victim Advocacy but did contact the military and joined a support group, the Tragedy Assistance Program, that assisted military families who lost a loved one.

Both sons of P5 were fatally shot. The youngest one's murder remains unsolved after 4 years, and the oldest was fatally shot by an acquaintance 3 years prior to this study. P5 indicated that no one from the police department or detective contacted him regarding either homicide. He stated, "When I did find out, I fainted/passed, [and said] 'not again!' I couldn't believe it. I guess that's what kicked off my drug addiction". P5 did not receive any psychological support or "justice" from the city police department or Victim Advocacy program. He described dissatisfaction with police and the district attorney, only receiving literature and brochures in the mail. P5 said, "I do not think they did a good job providing justice for either of my sons, and I believe 100% it was because they both were Black men." As a retired military person, the only way he could find help for his drug addiction and grief was, as he explained, "through the Veterans Administration (VA) a few years ago."

The oldest brother of P6 was fatally shot by a stranger 4 years prior to this study. He indicated that he was in another state and received a phone call that his brother was involved in an apparent home invasion. He stated, "I couldn't believe I was far from home; I needed to get home." He stated that the police and detectives met his family at the hospital and explained what happened. He indicated that while interacting with the state's attorney and prosecutors, he was satisfied with the CJS: "They informed my family what to expect, the emotional investment of the trial proceeding, and how we would be in the same environment as the perpetrator." However, P6 indicated that no resources, support, or counseling were provided to his family, not even his brother's family. He said, "My family bond strengthened without professional help, and everyone was there for each other." He mentioned how his mother prayed with him and how his brother would want him to move on with his life.

The youngest brother of P7 was fatally shot by a stranger 5 years prior to this study. In describing how he was notified, he mentioned receiving a call from his sister telling him to return home because his brother had been shot. While describing his interaction with the police at the hospital, he indicated that the conversation was cold, like a computer, and that the officer showed no empathy or emotions. He said, "Law enforcement does not understand what it means to lose a loved one to homicide." P7 mentioned that one of the perpetrators was apprehended and how it felt to attend some of the trial proceedings, stating "It wasn't easy, a constant reminder of the gruesome act, how it happened, and hearing the narratives of how your loved one was killed." He went on to say how it affected his mental state and that it was really hard for him. He

mentioned that he was not informed of the Victim Advocacy Services when it came to support or resources to assist him with his grief. He stated having no coping mechanisms and how he was thrown off balance: "I tried to suppress my anger and grief with alcohol, trying as much as possible to get high, to get my mind off that incident."

The boyfriend of P8 was fatally shot by an acquaintance 7 years prior to this study. When asked about being notified, she indicated being at home, receiving a call, and not believing it at first: "Never in a trillion years would I have thought he would get killed." She described the interaction with the police and detectives at the hospital as chaotic, out of control, and frustrating because the police were not telling them anything. She described feeling unsupported and felt that no proper care was given to her loved one: "They just did the bare minimum, checking off boxes to show they did their due diligence and job, but that was not the case." She mentioned only how she had just started receiving a lot of support in the past few years: "It took a long time to receive adequate care, but I am happy I found something myself: therapy and medication."

Data Collection

The data collection began after Walden University IRB approved the study in March 2023. Eight adults participated in the semi-structured audio-recorded interviews that were conducted on Microsoft Teams from March 2023 to April 2023. There were 2 participants recruited from a Facebook Group - Homicide Survivors and Thrivers, 2 from LinkedIn, and 4 who were referred to the study by word-of-mouth whose loved ones were victims of homicide over 5 years ago. This was slightly more than the originally specified inclusion criteria of 1 to 5 years.

I conducted each online interview in a private area in my home office, and each participant confirmed that they were in a safe location where they could speak freely. Before the interview began, I restated the interview format, the purpose of the study, and confidentiality and requested permission to begin with the interview recording.

Some interviews lasted about an hour, some for an hour and a half. No participants withdrew from the interview process. There were no issues or concerns that arose during the interview process. At the end of the interviews, each participant was provided the opportunity to ask questions or express any concerns they may have regarding participating in the research study. I concluded by thanking each participant for their willingness to participate in the study. The participants were also asked if they were experiencing any emotional or psychological issues due to the interview process, and I mentioned the 1-800 number for mental health support provided in the informed consent. Each participant indicated that they were okay.

Each interview was transcribed verbatim into a Microsoft Word and Excel document, and the data were saved on a password-protected laptop computer and a backup encrypted external flash drive. All identifiers were removed, and an assigned number was given to each interview for transcription. An encrypted external flash drive, a reflective note journal, and my personal laptop were locked and stored in a fireproof file cabinet in my home office. I was the only one who had access to the locked file cabinet. There were no changes from the data collection process as described in Chapter 3, and I did not encounter any unusual circumstances in the data collection process that have not been described. There were no unexpected ethical concerns regarding the data collection

process. All information was stored on a password-protected laptop computer; a

password-protected folder requires a password to access it. In adhering to and following

the Walden University IRB requirements, all documents used for the research study will

be maintained and kept for 5 years after the completion of the study, and all records

associated with the study will be destroyed after the 5-year retention period. All data in

paper forms will be shredded, and digital audio recordings, flash drives, and laptop data

will be deleted and permanently removed from the device before being destroyed.

Data Analysis

IPA was used to analyze the participants' experiences (see Smith et al., 2009). My

description of the plan in Chapter 3 conformed to the earlier edition of IPA (Smith et al.

2012). Here, I present my analysis process and results that better conform to the current

version of the process (which is almost identical to the original version) and language

(where there are slight variations). I began with the first interview, reading and re-reading

the transcript (and listening as well). I made margin notes while transcribing the

interviews and notes in my journal of any interesting and evocative ideas and comments.

At this early stage, I began to identify potential themes. This process was repeated for all

eight interviews.

As described in Chapter 3, the coding process was begun manually, using MS

Word and MS Excel, and I proceeded with this coding method for the entire analysis,

rather than using NVivo data analysis software. The coding process consisted of listening

to the audio-recorded transcript and re-reading the audio transcript to identify recurring

words or patterns produced from the data. Reviewing the data line by line was a repeated process that allowed me to truly immerse myself in the data.

The master code listed contained 101 codes placed into logical categories derived from the original thematic analysis. This list of codes, along with the transcripts in which the code was found at least once, is included in Appendix B. While frequency counts it do not capture the intensity or meaning of the code, it is interesting to note that the code repeatedly found in all eight transcripts was *angry*, as in the following examples:

I was so angry with myself and blamed myself because I always had a dark feeling about him, so I never really liked him from the beginning. A whole bunch of stuff I did not even know came out at that moment, and it was all correct information. (P1)

I was really hurt and angry; it was the way, the act, how he was murdered by someone that he knew. They waited until he turned his back and shot him in the back of his head. Maybe it wouldn't hurt so much, and I wouldn't be so angry if he had just gotten sick and passed away. (P2)

It was a very hard time for me in my life; I was angered. The anger and everything I had towards the perpetrator became regret because holding grudges against them didn't help me. As much as possible, I was trying to free my mind and forgive them. (P6)

In those moments, I tried to suppress the anger regarding the incident and towards the individuals involved. I tried to suppress my grief and anger with alcohol, I was

just trying as much as possible to get high, you know, just trying to get my mind

off that incident. (P7)

Two of the eight participants also expressed feelings of rage and anger and how

those feelings turned into fantasies of revenge. P3 stated, "I was losing my mind. I was

thinking, could we find this man? I want to scratch his fucking eyes out of his head." P5

explained,

I felt like going to his grandmother's house, shooting him dead, or sending

somebody around there, and I thought about it quite a few times. I know murder is

serious, but that's how I felt. I didn't act on it, and two wrongs don't make it

right.

There were six codes that occurred most frequently, that is, these were reported

by 7 out of 8 participants. These codes are shown in Table 3, along with examples

representing the essence of that code's meaning.

Table 3

Second Most Frequently Occurring Codes and Representative Quotes

Code	Examples of meaning from transcripts
Lack of empathy/ compassion from police and detectives	P8 People are just checking off boxes to say they did their due diligence and their jobs, but it wasn't with any compassion; it was just a job. P7 The conversation with the police officer, and his response was cold, like a computer or something they are to saying, like regular stuff that happens all the time. So they didn't really have that empathy and emotional support.
Racial issues	P1 Race played a part in the investigation because he was a White man, and I knew it was going to be a while before we actually got justice for my mom. The States Attorney, the first thing she thought to say was, We can offer a plea deal. I felt some type of way, and I didn't like it because he's a White man. "You know, if it was a Black man, being a Black in America, he would have been under the jail by now." P3 My great-nephew was killed by a White Police Officer, and he was cleared of all charges, but the city [name of city removed] settled a lawsuit with my niece. P5 I believe 100% because both my sons were killed. Black males and how society may have deemed them based on their past played a part in the homicide investigation.
Grieved alone	P1 My grieving process, I did not share how I was feeling. "If I had a panic attack, I usually do it alone; I tried to be strong for everyone else." P2 I didn't grieve you know, because I was trying to be strong for my other children and the mother of his children. I was trying to be strong, and my mind was processing it like he's just out of town, "You know he's not gone." P3 I guess I fell into a deep depression, but I was still able to do what I needed to do, but at night, I just cried and cried all alone." My family didn't know how to support me at that time.
Dissatisfaction with CJS	P2 No support or resources were provided to me or my son's children. I wouldn't have known about the Crime Victims Compensation Act if it wasn't for my cousin. They only paid for half my son's funeral and not even the whole funeral. It was you take this and go on about your business like so. P3 When there's a police-involved shooting, they don't necessarily get terminated; they get 30 days of death duty behind a desk, and after that, they return to work. "You know, the officer during the trial was promoted, so he's now a detective." P4 My mom took me to the hospital; they gave me his personal belongings, and the chaplain came out and said, "I'm sorry for your loss." There was no acknowledgment from either investigating detectives or the local law enforcement; no one was there to greet me or make a statement. I had to try to find out on my own what happened to my husband.

Code	Examples of meaning from transcripts
Homicide by gun	P2 An acquaintance shot my son in the back of the head.
	P3 My 16-year-old great-nephew was shot by a white police officer.
	P4 My husband was shot by his sister's boyfriend in a domestic violent dispute.
	P5 My two sons were shot, my youngest son's murder is a cold case, and an acquaintance shot my oldest son over money.
	P6 My youngest brother was shot outside a grocery store.
	P7 My oldest brother was shot during an apparent home invasion.
	P8 My boyfriend was shot by an acquaintance while gambling.
Unhealthy coping strategies	P2 I started drinking; I am not a drinker and didn't use to drink. Until that night when I got that call, I had to take a drink, and ever since that day, man, that's crazy; I've just been drinking since 2016.
	P4 I self-medicated with food. "You know, I would just get up and eat, do what I need to do, eat, go to bed at night, and eat." So, eating made me forget what I was going through for a minute." When you self-medicate with food, people help you eat because everybody buys you food or says, Come on, let's go get something to eat, and it makes them feel better to help you feel better. Food just kind of pacified me. I was almost over 300 because of self-medicating with food. P5 grieving probably, you know, caused me to kick off my drug addiction. Both my sons were murdered. P7 I tried to suppress that anger and my grief with alcohol. "You know, I was just trying as much as possible to get high, just trying to get my mind off that incident."

The third most frequently reported code (6 out of 8 participants) included *finding therapy on their own*. P1 and her siblings went to the House of Ruth. She said, "It felt okay being around other people, you know, who are going through the same thing as me." P3 went to an organization called the Torture Justice Center, which offers free trauma services for people impacted by police violence or terror. "I realized that my nephew's murder was kind of really consuming me; that's why I started in trauma therapy." P5 lost two sons to homicide and went to Roberta's House. "I didn't particularly like it…. you know, speaking in front of other people, everyone." I wanted a more private and intimate one-on-one; I lost both sons to homicide. P6 went to the internet to read about grief. "It calmed me down to read about other people's experiences who lost someone to homicide."

Based on my re-reading and re-listening and the results of this first cycle of coding, the codes were condensed into six major themes, including (a) *Being Notified/Immediacy* (b) *Aftershock*, (c) *Relationship between Survivors and the CJS*, (d) *CJS Does Not Care*, (g) *Emotional Relationship with the Community*, (e) and *Life Will Never Be the Same*.

For clarification, Table 4 shows how the 101 codes were categorized into six IPA themes with examples taken from the interviews.

Table 4

Six Frequent Occurring Themes, Codes, and Representative Quotes

Themes	Codes	Example quotes
Being notified/ immediacy	shock, disbelief, denial, stuck, unbelievable, anger, guilt, optimistic, fainted, confusion, devasted, scared, helpless, upset	P1 I found my mother lying on the floor. She was dead; she had been stabbed and beaten to death. I immediately started screaming and running through the house. I couldn't believe it. I was in a state of shock, and I couldn't move.
Aftershock	grief, grieving process, cope/coping, therapy, depression, healthy/unhealthy coping strategies, anxious, traumatized, alcohol/drugs, acceptances, spiritual	P5 My grieving probably caused me to kick off my drug addiction. P2 You know, when I started talking to you, I felt a little relief, like somebody was listening, you know what I'm saying?...I am also relieved because somebody is hearing me.
Relationship between survivors and CJS advocacy	unsupportive, satisfied/dissatisfied, resources, support, no justice, lack of empathy, checking off boxes	P8 It's just like a level of humanity that isn't really present when dealing with this sort of thing. P7 You know their response is like a computer or something, just like regular stuff that happens all the time… so, [their] response didn't really have that empathy and emotion.
CJS does not care	Re-traumatized, inhumane, outraged, victimization, racist, race, plea bargain, unsolved murder	P3 It's something about tragic deaths that impact people differently, Black people, anyway. P5 I guess the state's attorney, they don't do, you know, such a good job out here. That's why we have such a high murder rate and unsolved murders.
Emotional relationship with the community	organizations, church, street code, Angel Day, financial support,	P3 I connected with organizations that were doing work around police violence. P4 When people are doing pastoral care, they come, and they pray for you. They don't work with you through your grief. They come, pray for you, and then move on.
Life will never be the same	Outlook on life, acceptance, moving on, normalcy	P7 I was trying to move along with trying to get this whole shit out of my head, the death, the homicide. P2 just recently, when I went for the first-time last year in October to visit his gravesite. That's when I knew it was real. I broke down, and I just couldn't move; I just laid there. I was really hurt, and I was the way they killed him.

Despite the different circumstances surrounding the homicide, when it occurred, or the relationship of the victim to the participant, the data reflected a deep consistency in feelings, beliefs, and efforts to move past. No qualities of nonconforming or discrepant statements or cases appeared in the analysis process.

Evidence of Trustworthiness

Credibility

Before the first data collection process started, I needed to become familiar with the culture of the participants who were recruited for my research study. This process assisted me in obtaining an adequate understanding of this population, which allowed me to establish trust between the participants and myself (Shenton, 2004). Also, to ensure credibility for this study, I re-read and listened to each audio recording interview transcript multiple along with persistent observation. Each BFFHV was offered the opportunity to review and comment on a summary of their audio-recording interview transcription, which was emailed a week after their interview. I achieved persistent observation by constantly reading and re-reading the data, analyzing it, editing the codes, and categorizing it before finalizing the themes that provided in-depth insight into the phenomenon (Korstjens & Moser, 2018).

Transferability

The aim of this qualitative study was not to obtain generalizability but to contribute by providing a better understanding of the phenomena of loss and healing in BFFHVs. Transferability has been attempted by utilizing thick descriptions (Nowell et al., 2017; Shenton, 2004). Additionally, I attempted to achieve transferability by

providing transparency of the data collection and analysis processes as well as the

contextual elements of each participant's experience (Nowell et al., 2017; Shenton, 2004)

Dependability

Dependability was sought by paying close attention to the participant's verbal

communication, trying not to miss any nonverbal cues, and consistently utilizing the

interview guide. These details were reported. (Shenton, 2004). Another strategy used was

a reflective journal and an audit trail to ensure dependability to guide the quality of the

data analysis process (Nowell et al., 2017; Shenton, 2004). These strategies were

consistent with what was noted in Chapter 3 and contributed to the study's dependability

of process and findings. A study on this population has not been previously reported;

however, sufficient detail is anticipated to be provided through this study for future

replications.

Confirmability

I took several steps to minimize bias so that my own experiences would not cloud

the data-gathering and analysis process. Microsoft Teams meeting audio was used to

record and transcribe verbatim to capture the interviews, preventing me from including or

excluding any data. By utilizing a journal, I strove to maintain accountability due to the

close relationship between myself and the phenomenon that emerged by reflecting during

the research process. Ethical reflexivity was done through journaling to confront and

acknowledge any thoughts or comments that may have arisen throughout the data

collection process regarding my worldviews and personal experience of support, local

law enforcement agencies, and the courts (Tubig & McCusker, 2021). By being open and

honest in discussing my prior experience with homicide with each of the participants, I was able to be empathic and encourage them to speak as freely as possible regarding how they felt and what they believed.

Confirmability was also achieved by describing the procedures used to reach the finding. Any potential influences were listed that could potentially impact the interpretation of the data to reduce bias and the use of an interview guide (see Appendix A), reviewed and approved by the Walden University Research Reviewer and subject matter expert prior to the approval of the study (Shenton, 2004; Smith et al. 2012). In Chapter 3, in the section under the Role of the Researcher, any potential influence that could cause bias was listed.

Results

I identified six overarching themes that appeared across all eight interviews. I begin the discussion of each theme with a brief overview and then provide rich quotes that reflect participants' lived experiences. I attempted to synthesize and represent the participants' lived experiences and convey their meaning.

Theme 1: Being Notified/Immediacy

The theme of being notified/immediacy represents the shared profound feelings of disbelief, guilt, blame, rage, shock, and "being in a fog" upon being notified that their loved one was a victim of homicide. All participants described the experience of being shocked, overwhelmed and a sense of disbelief when they received the notification that their loved one was killed. Although some experienced immediate and delayed reactions, the overwhelm, shock, and disbelief were common in all participants.

P1 said she just sat there and felt "stuck in shock, disbelief, and denial …

although I think I knew … a part of me knew that she had already passed." Similarly, P2

described that she started screaming and dropping the phone when she received the

notification. "It was unbelievable, and I was in shock." She went on to say,

> like you would never think it would happen to your child. My son, his father, died
>
> well, got killed when my son was ten months old, and it was like the cycle was
>
> repeating itself over again because now my grandchildren are without their father.
>
> Similarly, P4 discussed how she did not believe that her husband was dead. She

said, "In my mind, I think it didn't happen; maybe he heard something, and it's not right,

not accurate. Everybody's just assumed somebody made it up, maybe [husband's name]

was somewhere else."

P6 indicated that he was in college when he got the notification. "I got a call at

2:00 a.m. … You know, at first, it doesn't correlate at all. I was confused; is this a joke? I

am very far from home."

P7 indicated that he was in denial. "You know, confused; I am not going to accept

this." He discussed how days turned into a week, weeks turned into months, and then it

dawned on him, "like he's gone now, he's really gone, it's forever, I am not going to see

him again!"

Theme 2: Aftershock

The theme of aftershock represents the shared finding of cognitive, emotional,

and behavioral experiences of anxiety, depression, aggression, and PTSD. Participants

described how they found it difficult to resolve their grief and mourn appropriately. P1

said, "I was constantly worried.… that the perpetrator would return to take my brother away." She also discussed how it was "like having a really bad breakdown." Similarly, P8 stated, "I knew I had lots of symptoms of PTSD, but no one believed me like; they are just like, no, you're fine, you can take this pill, you'll be ok … I didn't want that."

Similarly, P6 stated, "It was a bad thing … I felt very anxious and scared, couldn't sleep, and had many dreams about my brother." He also discussed waking up at night feeling really uncomfortable and how he was retraumatized, mostly every night because he was having dreams about his brother and how he was actually communicating with his brother in his dreams.

Many participants felt that their symptoms were minimized, and they were not able to acknowledge their own grief. For instance, P2 said, "I was trying to do everything I was supposed to do … I just stayed home. I guess I was depressed; I didn't want to go anywhere. I slept a lot, and I guess that's how I coped with it."

Similarly, P4 described how it was devastating for her, how here children were two and three years old, and everything had fallen on her. She described falling into depression but was still able to do what she needed to, and how, at night, she just cried because when nightfall hits, the thoughts come, and reality sets in. "The nighttime can take you out, how your thoughts can overflow you, and you just cannot get away from them."

One dimension of the aftershock theme included self-blame. All participants described the guilt regarding how they could have done something to prevent the death. P1 described feeling guilty for a long time: "You know, I feel like if I was there, I could

have done something to save her." P2 expressed the same sentiment in discussing how she felt guilty that she did not protect her son:

The hardest thing was, you know, when your kids are in trouble, you always try to be there. I was five hours away and didn't have a car, which was really hard for me. "You know, you're thinking about being there, trying to help him, and I couldn't be there." P3 describes how they had a moment when everyone assumed some kind of responsibility. "What could we have done, you know, differently … I beat up on myself a little bit every day because once, you know, he was trying to break bad a little bit; I should have, you know, I should have gotten him."

The participants and their families grieved and coped with their grief in myriad ways, including drug and alcohol abuse, religion, and advocacy. P5 stated, "Unhealthy coping strategies for me.… was using alcohol and drugs, not talking to people, and keeping it inside. Similarly, P3 stated, "I can't say everybody did unhealthy coping strategies, and I can't say anyone started doing more because it was already present." She discussed how drugs and alcohol addictions were already being used in her family. However, there were times when there could be more consumption of alcohol in her family.

P7 indicated that after the incident, he was thrown off balance, confused, and had no coping mechanism for how he was trying to suppress his *anger* and grief with alcohol.

You know, I was just trying as much as possible to get high and get my mind off my brother's murder. But when I got a clear head, the grief would come back like before, so it was wearing me out physically and affecting my physical appearance.

Other participants described developing healthy coping strategies as a way to help deal with losing their loved ones to homicide. P1 described coping with the homicide of her mother by using a lot of breathing techniques and prayer to assist her with panic attacks when she gets overwhelmed.

> Breathing techniques helped me calm down when it felt like my body was running a marathon and my heart was pumping fast; it helped slow my heart rate. With prayer, I am able to talk to God, and it is just like a sense of peace that comes over me when I pray.

P4 discussed how, after joining a military nonprofit program called the Tragedy Assistance Program, she felt like her life was missing something and did not feel complete. "I had to help families like myself, so I got a job working with the local District Attorney's office, and we started a support group for families of homicide."

Theme 3: Relationship between BFFHVs and CJS

The theme of the relationship between BFFHVs and CJS represents participants' experiences of being overlooked, treated without compassion or empathy, having no input in the trial proceedings, and racial issues. P1 described how race played a part in the homicide investigation of her mother. "You know, it was a sense of relief at first [that he had a person in custody], but he was a White man, so I knew it was going to be a while before we actually got justice for my mom." When the State's Attorneys offered a plea deal, she indicated feeling that if it were a Black man who committed the murder, she believed that he would have been in jail by now.

P2 expressed how she felt that the police did not do a good job pursuing the person who killed her son and how they are still free. "People call me to this day, telling me they see him just going about his everyday life." Similarly, P3 discussed how she felt that the city is notorious for killing people, especially Black people, and then covering things up.

> You know, that's all they do. The fact that a White police officer killed my nephew, was this out of some systemic racism? Did he see him as disposable, like he had no value? He knew nothing about him or the community where he worked. (P3)

Both P5 and P8 described how they felt that their loved ones' past played a role in how CJS treated the murder and how that affected the outcome of their case. For P5, his first son's murder is an unsolved case, and in his second son's homicide, the individual was incarcerated but only served a one-year prison sentence. P5 explained, "You know, I was going to court, seeing everything going the defendant's way. Listening to how my son was being labeled like a terror in society because he had gun cases and been locked up a few times."

P8 described going to some of the hearings and feeling that sometimes it was too much. "They just kept bringing up lots of stuff that I didn't know, digging into his past when he was a teenager." She felt that the attention that was given to her loved one's criminal past seemed to detract from the homicide itself. "It was really bad, like traumatizing for me and my boyfriend's family, the need to go through that repeatedly, like over and over again. I don't really think any of that was appropriate."

A dimension of the theme relationship between BFFJVS and CJS is how the participants described the media coverage, portraying the homicide victim and their family in ways that negatively affected the grieving and coping process. P3 described how the media portrayed the victims in a police-involved shooting. "Who they are, and that they must have done something in order to get shot. … You know, families are basically criminalized like it was our fault that he got killed. I felt a sense of rage." P8 remembered telling the news reporter what she thought, but when it got printed, she recalled that it was inaccurate and declined to have it printed. "I was in a really vulnerable position and believed that they played on that... It made me feel dumb, stupid, retraumatized, and re-victimized." She asked, "Why are reporters allowed to approach vulnerable people in the early stage of the homicide?" She believed that the news media drives certain biases in the newspaper and on television when it comes to Black people who are victims of homicide.

Theme 4: The CJS Doesn't Care

In this theme, the participants described the common experience that the CJS did not care about their loved ones who were murdered or the survivors. P1 described being dissatisfied with the CJS. "I don't know how to explain it. They weren't really involved with me. I felt that they cared more about the perpetrator than me." She was only asked if she was ready to answer questions, who she thought did it, and where her brother was because he was not there.

P2 stated, "They only paid for half of her son's funeral, not the whole funeral. It was like, you take this and go on about your business. I am trying to think of the words;

there was no like, no empathy, compassion, or support." Similarly, P5 stated, "Unless the person who was a victim of homicide is portrayed in a positive light in the news (i.e., young child or kid, college student or employed), you know, good luck in trying to get help from the city police and the state's attorney's office." His opinion was that the state's attorneys' office does a very bad job when it comes to providing justice for Black victims of homicide and their families.

P7 had similar experiences, but it was negative regarding his interaction with the local police and the detectives that ultimately shaped his views. "At the emergency room, the conversation with the police officer and how he replied to me was cold. You know, like a computer or something, like regular stuff that happens all the time." He described how he felt they did not have empathy or emotion and were just jotting something down on paper.

He just looked at me and said, "We lost a young guy to a shootout," and he continued writing. I told him that was my brother, and he said, "Oh, that was your brother." He was still writing and wasn't giving me that much attention."

A dimension of the theme CJS doesn't care is about how they felt their loved one was treated by hospital staff during the homicide. P8 went on to say,

When Black people go to this particular hospital in the community, I feel like some of the workers at the hospital are biased, and they don't want to use the hospital resources to properly care for them because they may feel they don't deserve adequate care because they did something to get killed.

An additional dimension of this theme was the experience of not being informed of any community resources available and not receiving any assistance from CJS, victim advocacy, or financial assistance. P1 indicated that she received no resources or support and had no experience with the Victim Advocacy office. "We found and went to the House of Ruth. It helped a lot knowing that other people are going through what we are going through." Similarly, P2 stated that they had to do the research themselves. "You know, I got a lot of information from my cousin; she helped me get things on the ball, and I wouldn't have known about any available resources if it wasn't for her."

P4 also indicated that she did not talk to the District Attorney or a victim's coordinator and never received any resources. "I tried to figure out everything on my own. There was a program called the Tragedy Assistance Program, a military nonprofit, for people who lost people in the military." She discussed that is where she started the healing process, did not feel alone, and was able to get out of this dark hole that she was in; she also expressed her true feelings and opened up about how she was feeling after the homicide of her husband.

Another additional dimension of the theme, CJS doesn't care, is no services are available for family members whose loved one was involved in a police shooting homicide. P3 stated,

> No one offered any services to us because it was a police-involved shooting, and
> no one from the city or the county, or organizers reached out. They have the
> Victims Assistance Fund, but not for victims of police violence. Even families

who have lost a loved one to a police-involved shooting still experience trauma,

lose jobs, and need financial support. We're trying to survive.

Theme 5: Emotional Relationship to the Community

The theme of emotional relationship to the community: 6 participants described

how the support of their community following the loss helped with grieving and

navigating their socio-emotional needs for relationship, support, and connection. For

example, P1 talked about how people in her community were caring and helpful and how

she had to start a GoFundMe website for her mom because she had no life insurance, and

people gave. "That made me feel loved because, you know, I thought I was all alone and

would have to figure out how to come up with the money to bury my mom."

P4 discussed how she created a support group for other family members who lost

a loved one to homicide.

I started a nonprofit called "Vast," a victim's support service that supports

families who lost a loved one to homicide. We network with other family

members regarding homicide and the law, providing support and assistance and

forming lifelong friendships. We are creating our own support.

Similarly, P3 organized different events in the community to honor their loved

one's memory who was a victim of homicide.

You know, we did a couple of things after it happened as part of our mourning

and healing process. One was a ritual right by where it happened, and another was

a zine-making party; we wrote poems, painted pictures, drew things to put the

booklets together, and sponsored a festival in the community. "We wanted to do

some restoration and thank the community because someone called my niece and

told her that her son, my nephew, had been shot."

In contrast, two of the participants described the absence of or limited availability

of community. For example, P2 had challenges because she lived 5 hours from her

family.

The community, school, and church reached out to my grandkids, who had lost

their father; they were very supportive, but they never received any resources

from the CJS … never provided any services or contacted them regarding their

grief, especially during the holidays.

P3 also noted that neither the community nor the church reached out to her niece.

"The daycare center where my nephew was murdered provided the video footage, and the

owner gave my niece a check and kept going." P5 also described that lack of support

from her community:

I winged it, had no support, no help. The church pastoral care comes and prays for

you, I mean, prayer is welcome, but what now? I am in deep depression and

grieving; someone comes and prays for you and then goes, you never see them

again. That's not solving the problem or scratching the surface to assist me with

my grief.

In contrast, P7 described the support her mother received from the church and

school.

The church we attended, you know, contacted my mama and visited her and his

classmates from school; they dropped flowers. They told her how loved my little

brother was, which was so special and calmed my spirits. Knowing my brother was loved reminded me what a great person he was.

Theme 6: Life will Never be the Same

This theme life represents the shared profound feelings of how their lives and worldview were changed. Some of the participants embraced the change as part of their healing process, while others were still struggling with how to reconcile the past with the present and future. For example, P3 was able to distinguish her feelings and was also motivated to work to make a change.

> The murder of your loved one can weigh heavily on your heart for a long time, and it was devastating for our family. It can take a long time to get over, three to five years or longer if you ever get over it. I was activated and started organizing and connecting with organizations doing work around police violence, but it took a long time for me to move past, move past the rage.

In contrast, P4 described their family members' inability and limitations, understanding how she wanted some normalcy. Her family had challenges with understanding her.

> People didn't realize that I needed some normalcy in my life. I didn't want to talk about the homicide, the death, or about my loss. I just wanted some normalcy back in my life, even if it was just for a minute. People were so afraid of death and didn't want me around; they did their own thing, leaving me alone to grieve, cope, and try to make sense of this tragedy.

P6 described that the most difficult part for him was moving on from the events and consequences and shifting into the realities of life without her brother.

> You know, trying to start having a normal life, going back to my normal routine, knowing that my brother is deep down the soil. Losing a loved one for the first time is a very hard thing to experience. It hit me in a way I didn't expect, and it affected every aspect of my life.

Similarly, P5 stated, "I need to start my sessions again with my psychologist to put my mind in a better place because sometimes I zone everybody out." P2 indicated that she still felt depressed and worked to keep herself busy. "I probably need to talk to someone… you know, doing this interview, I feel somewhat better."

Discrepant or Unusual Findings: Rituals

"Angel Day" [the day their loved one was killed] was this study's thematic unusual finding. Participants discussed remembering and formally acknowledging the date their loved one was a victim of homicide. P3 and P4 described celebrating the day that their loved one was murdered. P3 described:

> Like my nephew's Angel Day is coming up, one of the organizations is sponsoring this year's Angel Day. They will see what we want to do and how they can support, "which is an absolute blessing," to have people out there that remember and text around his Angel Day.

P4 also discussed their family's Angel Day.

When my husband Angel Day comes around, we get together and release balloons

at his gravesite. That's when I talk to my sons about their father because they

were young when he was killed, and they didn't get the chance to know him.

"Cleaning up their loved one's blood" was an additional unusual finding of this

study. P3 described how family members have to go and clean up right after the murder

"because the city doesn't do it.… We were going to clean, purge, and sage, but there

wasn't any blood; he must have bled internally, so we just poured out a libation to the

ancestors."

Summary

The first research question explored how BFFHV described their experience with

local law enforcement and the courts during the investigation of the homicide. Two

themes (*Relationship between BFFHV's* and *CJS*; *CJS Doesn't Care*) spoke directly to

this question. Participants felt overlooked and were treated with little compassion for

their loss and its consequences. Some felt prejudice because of their loved one's criminal

past; some felt the media portrayed their loved one and the crime in a biased light. The

lack of compassion and resources from the CJS added to their pain.

The second research question focused on the experience of grief over traumatic

loss. The results produced three themes that demonstrated how grief was first

experienced and then how grief changed over time. Grief was first expressed as shock,

disbelief, rage, and guilt, as represented by the theme *Being Notified/Immediacy*. As

described in the theme *Aftershock*, participants' experiences ranged from anxiety and

depression to anger and rage to self-blame to self-medicating with drugs and alcohol ("like PTSD").

The third research question focused on the experience of coping with traumatic loss. Experiences of coping varied across the themes and over time as participants attempted to come to terms with their loss and the consequences, both immediate and long-term. As mentioned above, some turned to unhealthy coping strategies (drugs, alcohol) and continued to struggle with depression. Some participants found healthy coping strategies in individual activities (like breathwork and prayer), and others reached out to existing community and online resources (like the House of Ruth and Victims Trauma) or created their own forms of ritual to honor their lost ones (Angel Day). The theme, *Life Will Never Be the Same*, reflects how coping with loss has extended from the event to the present moment and how their lives were forever changed.

The fourth research question focused on their current relationship with the community, and there was variation across the responses of the participants. Some responded that people in the community were caring and helpful. They initiated or participated in community events to find support and engage with others who had experienced similar losses. In contrast, two participants found little ongoing support in the community and reported that the absence of this support made it harder to cope.

Chapter 5 will provide a summary discussion of the findings regarding considering the need to expand the understanding of the effects of homicide from the lived experiences of BBHVs after experiencing the homicide. Then, I will provide the

study's limitations and recommendations for social change. Finally, I will explore the

implications before providing a conclusion.

Chapter 5: Discussion, Conclusions, and Recommendations

In this phenomenological study, I explored how BFFHVs grieve and cope with the traumatic loss of their loved ones and the courts, local law enforcement agencies, and the communities. Since this population is at risk for developing mental and psychological issues as a result of the homicide, this study was to provide a better understanding of how individuals who experienced losing a family member or friend to homicide described their experience. IPA was the research design to develop the data collection tools and guide the data analysis process.

I conducted interviews with eight Black family members and friends who lost a loved one. Six themes emerged:

- *Being notified/immediacy* describes their experience when they were first notified that their loved one was a victim of homicide.

- *Aftershock* represented the emotional response to the sudden, unforeseen, and unexpected homicide death.

- *Emotional relationship between BFFHVs and CJS* described how the participants interaction with local law enforcement, detectives, state attorneys, and victim advocacy.

- *Emotional relationship to the community* described their relationship with schools, churches, and their community following the homicide.

- *Life will never be the same*, described how their world view changed due to the homicide.

During the experience of losing a loved one to homicide, these participants participated in healthy and unhealthy coping strategies, found resources and support, ways to remember and honor their loved ones, and dealt with the reality that they are never coming back. This study noted two unusual findings: Angel Day and cleaning up the homicide victim's blood. Angel Day was described as "remembering the day that their loved ones were killed" (P3). "Cleaning up the victim's blood" represented the victim's family going to the area where their loved ones were killed and cleaning up their blood because the city would not. These unique reports accentuate the deeply personal and traumatic nature of this experience.

Interpretation of the Findings

Findings as They Related to the Literature

According to the Violence Policy Center (2021), African Americans account for 14% of the U.S. population, and African Americans also account for 50% of homicide victims in the United States. This finding was not investigated for this study, but it was something that this study affirmed. Seven of the eight participants mentioned losing one family member to homicide, and one out of the eight participants lost two family members to homicide.

The six major themes of the effects of homicide that emerged from the data were (a) being notified/immediacy, (b) aftershock, (c) relationship between BFFHVs and CJS, (d) CJS doesn't care, (e) emotional relationship to the community, and (f) life will never be the same. The themes supported are consistent with current literature. Prior research emphasized the need to understand the overwhelming effects of homicide (Connolly et

al., 2015; Sharpe, 2015). For example, Connolly et al.'s (2015) systematic review identified three themes: effects of homicide on family member survivors, grief experienced by surviving family members and friends survivors, and resources and support. These are similar to the current study's findings, but the current study goes on to include contemporary issues of CJS law enforcement and community support.

The six themes discovered in this analysis are relevant to prior and current literature on survivors of family members whose loved ones were victims of homicide. The first theme, being notified/immediacy, represented the shared profound feelings of disbelief, guilt, blame, rage, shock, and "being in a fog" upon being notified that their loved one was a victim of homicide. Findings from Englebrecht et al. (2016) and Lee et al. (2020) also indicated that the initial response to homicide produces feelings of shock, disbelief, guilt, shame, and fear. The second theme, aftershock, represented the cognitive, emotional, and behavioral effects of homicide on the participants. These included anxiety, depression, aggression, and PTSD. Das et al. (2021) also found that the aftershock can lead to increased emergency room visits, community health clinics, primary physicians, and mental health services. The third theme, relationship between BFFHVs and CJS, represented the shared feelings of being overlooked, treated with no compassion or empathy, lack of communication, and racial issues. P3 noted, "Did he see him as disposable like, he had no value?" He knew nothing about him or the community where he worked. "I just always wonder psychologically, where are they, White police officers, where are they mentally?" Findings from Sharpe (2015) also described local law enforcement as being standoffish, indifferent, uncaring, or insensitive. The fourth theme,

CJS doesn't care, represented the shared similar perceptions of how CJS did not care about their loved ones who were murdered. Common themes arose: satisfied, dissatisfied, no support or services, and plea bargains. Baker et al. (2019) also described how BFFHV's grief was misunderstood by society and the CJS and how they should minimize their grief and move on with their lives. The fifth theme, emotional relationship with the community, represented similar experiences of their relationship with the community. Findings from Baker et al. (2019) and Englebrecht et al. (2016) described how BFFHVs might develop disenfranchised grief and isolation if their community does not accept their loved one's death, local law enforcement agencies, and the courts. The sixth and final theme, life will never be the same, described the shared feelings of how their loved one's deaths impacted and changed their worldview. Findings from Bucholz (2002) described that without BFFHVs receiving adequate support in dealing with their loved ones' deaths, it could diminish their worldview regarding local law enforcement agencies, the courts, their sense of security, and their perception that people are good.

A review of literature published since my first review focused more attention on the survivor's experience, conceptualized as *victim devaluation*, which draws on Black's Behavior of Law (1976) for its theoretical insights. For example, Pizzaro et al. (2020) found that police perceptions of Black victims and their community regarding the homicide clearance rates may contribute to the attributable devaluation of Black victims, which negatively affects the homicide investigation, resulting in mistrust of the police and CJS within those communities. The results of these studies were consistent with the findings from the current study, as participants described their experience of devaluation

from the report of the homicide, through the investigation, to the end of their relationship with the CJS, with the survivors feeling lost and without support.

Relevance to the Theoretical Framework

Heider's attribution theory (1920, 1925) was the framework used to develop the questions and guide the data analysis. Attribution theory focuses on describing a causal link between the properties of objects, the properties of perceptions of the objects, and how they interact (Malle & Ickes, 2000). According to Weiner (2008), Heider viewed an event, action, or occurrence as a reason to search for causes (i.e., attributions). Heider considered attribution essential for understanding how to modify behavior. Subsequently, the study of attribution became an important part of cognitive functionalism and social psychology (Malle & Ickes, 2000; Weiner, 2008).

I explored four primary phenomena in this study. The first was the interactions with local law enforcement and the courts, where participants externally attributed their struggles with acceptance and getting support to what they declared was missing from the CJS during the investigation. The second phenomenon explored was grief. Grief was expressed as what could have been done differently, and this was expressed as both internal attributions (e.g., "I could have done more") and external attributions (e.g., "the police should have done more"). The third explored was coping. The questions of how to cope were answered with internal attributions (e.g., "I took it upon myself to find the killer") and external attributions (e.g., "seeking help from the VA"). The fourth phenomenon explored was the experience of community, which tended to be more located in external attributions. P3 attributed the conclusive evidence of their great

nephew's murder to community efforts (not the efforts of the police). P1 went to the House of Ruth to find a community of support, and P5 went to Roberta's House. Most poignant of all, the disrespect and lack of follow-through that most participants experienced were externally attributed to racial discrimination and lack of fairness when Black people are killed (Peffley et al., 2017).

Limitations of the Study

One limitation of this study was the small sample size, which limited the transferability of this study's findings (Shenton, 2004). Having a larger sample size could strengthen the validity of the findings. Another possible limitation of this study, as discussed in Chapter 1, was the nature and the procedure of the research design, with the design intensity and the participant's ability to accurately describe their lived experience of losing a loved one to homicide. Concerning the design, my aim as a qualitative researcher was not to obtain generalizability but to utilize thick descriptions to better understand the phenomena of loss and healing for BFFHVs. Although a purposeful and snowball sampling methodology was used, all the participants were African Americans who reported having lost at least one loved one to homicide. Therefore, transferability may have been limited.

The amount of methodical rigor conducted in this study prevented any noticeable limitations of the findings. None of the participants' voices went unheard, and none of the participants ended their interviews early. The IPA approach was used to conduct this research study to support any concerns regarding the validity of the participants' truth in their descriptions. The dependability of the results emerged from the participants' verbal

communication of their lived experiences. Participants were used as a form of member checking to confirm the meaning of their interviews and responses and participation throughout the interviews. No transcripts were returned with any feedback. Therefore, I was unaware whether that validates the accuracy or if they were not reviewed at all by them. I was not able to access any homicide victim's police records or interview police officers, detectives, or anyone from the state attorney victim advocate's office (i.e., for triangulation). Therefore, I could not fully know the extent of the accuracy or truthfulness of the participants' lived experiences; also, I did not question any of the participants' authenticity. Triangulation may have resulted in greater credibility of those shared unique and valuable lived experiences in the study of each of the BFFHVs themselves, which could contribute to the existing gap in the literature.

Recommendations

It is recommended that future research be conducted to address the limitations that were raised in this study; the first recommendation is to improve the recruitment process in order to reach a more diverse sample, reaching out to police officers, mental health professionals, psychologists, and hospital staff, and emergency room physicians, to ensure the inclusion criteria for a greater diversity amount of participants. This may improve transferability by enhancing the credibility of the study findings, although that population was not important to this study.

The second recommendation would be to follow up the current study to explore the same phenomena among families. This would include young and older siblings

between the ages of 10 and 17. This would further expand the understanding of how this event is experienced in the family system.

It is also recommended that future researchers explore these events from the perspective of local law enforcement. Law enforcement officers often arrive on the scene first and then have to interact with the families. Understanding how law enforcement officers are trained, as well as the organizational limits and personal biases that may inhibit them from acting with greater compassion during and after the event, would add meaningfully to the literature on this topic.

Finally, it is recommended that future research consider other conceptual and/or theoretical frameworks. Attribution theory (Malle & Ickes, 2000; Weiner, 2008) was helpful in understanding how BFFHV's coping and grief were expressed, but other perspectives would be helpful as well. For example, Bowen's family systems theory has been applied to the study of how trauma affects the family (e.g., Powers, 2017), and this would be particularly helpful for future researchers to consider.

Implications

This study provided several implications for policies and practices that would promote positive social change. I identified three areas where positive social change can be made, as suggested by this study's findings. Homicide is a serious issue that affects entire communities; therefore, the suggested recommendations could have a positive social change for BFFHVs and the broader community.

The study confirms that there is a lack of support provided to BFFHVs regarding grieving and coping with the loss of their loved one who was a victim of homicide,

especially for those who lived in specific neighborhoods and may not have already received support from the CSJ or their communities. This is an opportunity for the CJS and healthcare professionals to make a difference when it comes to providing or encouraging support and authorizing resources and groups to support those willing to assist BFFHVs in managing and coping with their grief.

I recommend that law enforcement officers, detectives, physicians, and school counselors take training to increase their awareness of the challenges that BFFHVs face beyond coping with grief and loss. Increasing awareness of the trauma BFFHVs deal with could result in greater coordination of resources and support to help deal with the feelings of abandonment and loss. I would also encourage this training to be offered to school districts and their staff in an effort to provide them with a better understanding of the challenges faced by BFFHV students and their parents to adequately assist them with navigating at school and at home.

Resources and services in the local community exist but may not be easily accessible. Local community resources can be developed and coordinated and include immediate counseling and resource support at the initiation of the event, as well as subsequent outreach to assist BFFHVs with learning how to create support in their communities. Working at the local level would enhance the possibility that resources, services, and interventions to help BFFHVs could be tailored to meet the needs of the specific individual in their community.

Current epidemiological and demographic researchers have recognized that Black communities deal with unique stressors regarding the events of homicide (Burrell et al.,

2021; Captari et al., 2020; Huh et al., 2020). This includes systemic racism as well as the lack of resources common to most impoverished communities. Implications for social change mean working from the ground level up to rebuild trust in law enforcement and courts that are supposed to protect all citizens.

Conclusion

The findings from this study are supported by the rich description of the lived experiences shared by the participants. Growing up on the south side of Chicago, I recall losing several family members and friends to homicide gun violence. No one in my family (especially the homicide victim's parents, grandparents, and siblings) was able to grieve for our loved ones properly. Could it have been that no one knew how to grieve or that the event was viewed as a tragically normal part of life, repeated over and over again? Intergenerational trauma explains how the emotional and psychological pain from historical trauma that Black Americans experience from racialized violence is multidimensional and passed down from generation to generation (Wilson et al., 2023). Transforming transgenerational trauma requires a rallying of the community to stand up against normalized violence and work with the law to change policies and attitudes.

For BFFHVs, there should never be a time limit put on how long they grieve losing a loved one to homicide; there should never come a time when CJS feels like they have to draw the line when it comes to investigating the homicide of someone's family member; there should never be a time when society or the community feels as if BFFHVs should be over the loss and move on with their lives; and there should never be a time when BFFHVs feel if they are alone and have nowhere to turn for support and assistance.

These findings distinctly support the issue of how grieving and coping with losing a loved one to homicide is more complex and perhaps more prolonged than the loss surrounding natural causes of death. The participants' lived experiences revealed that grief and coping occurs adaptively and maladaptively and devastates personal, family, and community well-being. Losing a loved one to homicide is overwhelming, and the participants in this study developed their own way of coping and dealing with the event. The shared lived experience shines a light on this underrepresented population and the hope that they will live to see a better day.

References

Alves-Costa, F., Hamilton-Giachritsis, C., Christie, H., van Denderen, M., & Halligan, S. (2019). Psychological interventions for individuals bereaved by homicide: A systematic review. *Trauma, Violence, & Abuse*, *22*(4), 793–803. https://doi.org/10.1177/1524838019881716

Alves-Costa, F., Hamilton-Giachritsis, C., Christie, H., van Denderen, M., & Halligan, S. (2018). "Everything changes": Listening to homicidally bereaved individuals'' practice and intervention needs. *Journal of Interpersonal Violence*, *36*(5-6), NP2954-NP2974. https://doi.org/10.1177/0886260518766558

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). https://doi.org/10.1176/appi.books.9780890425596

Baguley, C., McPhedran, S., Eriksson, L., & Mazerolle, P. (2020). How do different case conclusions impact on survivors of homicide? Developing and applying a conceptual framework to organize current empirical knowledge. *Journal of Victimology and Victim Judicial, 3(1),* 57-71. https://doi.org/10.1177/2516606920927293

Bailey, Z. D., Feldman, J. M., & Bassett, M. T. (2021). How structural racism works – Racist policies as a root cause of U.S. racial health inequities. *The New England Journal of Medicine*, *384*(8), 768–773. https://doi.org/10.1056/NEJMms2025396

Baker, D., Norris, D., & Cherneva, V. (2019). Disenfranchised grief and families' experiences of death after police contact in the United States. *OMEGA - Journal of Death and Dying*, *83*(2), 239–256. https://doi.org/10.1177/0030222819846420

Bartol, C. R., & Bartol, A. M. (2008). *Criminal behavior: A psychosocial approach (8th ed.)* Pearson.

Bartol, C. R., & Bartol, A. M. (2017). *Criminal behavior: A psychological approach (11th ed).* Pearson.

Berthelot, E. R., Brown, T. C., Thomas, S. A., & Burgason, K., A. (2016). Racial variance, disadvantage, and lethal violence: A survival analysis of black homicide victimization risk in the United States. *Homicide Studies, 20*(2), 103-128. https://doi.org/10.117/10887679115570311

Bloomberg, L. D., & Volpe, M. (2016). *Completing your qualitative dissertation: A road map from beginning to end.* Sage.

Boelen, P.A. Olff, M., & Smid, G. E. (2017). Traumatic loss: Mental health consequences and implications for treatment and prevention. *European Journal of Psychotraumatology*, *10*(1). https://doi.org/10.1080/200008198.2019.1591331

Botelho, M., & Goncalves, R. A. (2016). Why do people kill? A critical review of the literature on factors associated with homicide. *Aggression and Violent Behavior, 26,* 9-15. https://doi.org/10.1016/javb.2015.11.001

Brantingham, P. J., & Uchida, C. D. (2021). Public cooperation and the police: Do calls-for-service increase after homicides? *Journal of Criminal Justice, 73*, Article 101785. https://doi.og/10.1016/j.crimjus.2021.101785

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research Study in Psychology, 3(2),* 77-101. https://doi.org/10.119/1478088706qp063oa

Bucholz, J. A. (2002). *Homicide survivors: Misunderstood grievers.* CRC Press.

Bureau of Justice Statistics. (n.d.). *YoursSource for criminal justice statistics*. Office of

Judicial Programs, U.S. Department of Justice.

https://www.bjs.gov/index.cfm?ty=tp&tid=311

Burrell, M., White, A. M., Frerichs, L., Funchess, M., Cerulli, C., DiGiovanni, L., &

Lich, K. H. (2021). Depicting "the system": How structural racism and

disenfranchisement in the United States can cause dynamics in community

violence among males in urban black communities. *Social Science & Medicine,*

272, Article 113469. https://doi.org/10.1016/j.socscimed.2020.113469

Cambridge Dictionary. (n.d.) Grieving. In *Dictionary.Cambridge.org*. Retrieved August

22, 2022, from https://dictionary.cambridge.org/us/dictionary/english/grieving

Captari, L. E., Riggs, S. A., & Stephen, A. (2020). Attachment processes following

traumatic loss: A mediation model examining identity distress, shatter

assumptions, prolonged grief, and posttraumatic growth. *American Psychological*

Association, 13(1), 94-103. https://dx.doi.org/10.1037/tra0000555

Centers for Disease Control and Prevention. (2015). *National violent death reporting*

system (NVDRS) fact sheet. https://www.cdc.gov/violencepreventions/nvdrs/

Centers for Disease Control and Prevention. (2020). *National center for health statistics.*

https://wonder.cdc.gov/controller/datarequest/D76;jsessionid=754614D537CBDD

84E41730CB167A

Center for Diesease Control and Prevention (2018)

Connolly, J., & Gordon, R. (2015). Co-victims of homicide: A systematic review of the

literature. *Trauma, Violence, & Abuse, 16(4),* 494-505.

https://doi.org/10.1177/1524838014557285

Cornell School of Law. (2020). *Legal Information Institute: Criminal Justice*.

https://www.law.cornell.edu/wex/criminal_justice#:~:text=In%20the%20United%
20States%2C%20criminal,U.S.%20Attorney%20General%20George%20Wickers
ham

Creswell, J. W., & Creswell, J. D. (2018). *Research design: Qualitative, quantitative, and
mixed methods approaches (5ᵗʰ ed.).* Sage.

Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquire and research design: Choosing
among five approaches (4ᵗʰ ed).* Sage.

Das, A., Singh, P., Kulkarni, A. K., & Bruckner, T. A. (2021). Emergency department
visits for depression following police killings of unarmed African Americans.
Social *Science & Medicine, 269*, Article 113561.

https://doi.org/10.1016/j.socscimed.2020.113561

Diehr, A., & McDaniel, J. T. (2018). Lack of community-oriented policing practices
partially mediates the relationship between racial residential segregation and
"black-on-black" homicide rates. *Preventive Medicine, 112,* 1799-184.

https://doi.org/10.1016/j.ypmed.2018.04.032

Djelantik M, J., Smid, G. E., Mroz, A., Kleber, R. J., & Boelen. P. A. (2020). The
prevalence of prolonged grief disorder in bereaved individuals following
unnatural losses: Systematic review and meta regression analysis. *Journal of
Affective Disorders, 265,* 146-156. https://doi.org/10.1016/j.jad.2020.01.034

Durosini, I., Tarocchi, A., & Aschieri, F. (2017). Therapeutic assessment with a client

    with persistent complex bereavement disorder: A single-case time-series design.

    Clinical Case Studies, 16(4), 295-312.

    https://doi.org/10.1177/1534650117693942

Edwards, T., Sharpe, T., Bonomo, A., & Massaquoi, N. (2021). Exploring research on

    coping strategies of black survivors of homicide victims: A scoping review

    protocol. *BMJ Open*, *11*, Article e049784. https://doi.org/10.1136/bmjopen-2021-

    049784

Englebrecht, C. M., Mason, D. T., & Adams, P. J. (2016). Responding to homicide: An

    exploration of the ways in which family members react to and cope with the death

    of a love one. *OMEGA – Journal of Death and Dying, 73(4),* 355-373.

    https://doi.org/ 10.1177/0030222815590708263-272

Ezell, J. M. (2021). Understanding the situational context for interpersonal violence: A

    review of individual-level attitudes, attributions, and triggers. *Trauma, Violence,*

    & Abuse, 22(3), 571-587. https://doi.org/10.1177/1534838019869100

Federal Bureau of Investigation. (2018). *Crime in the United States, 2018.* U.S.

    Department of Justice. https://ucr.fbi.gov/crime-in-the-u.s/2018/crime-in-the-u.s.-

    2018/topic-pages/murder

Ferrito, M., Needs, A., Phil, D., & Adshead, W. (2017). Unveiling the shadows of

    meaning: Meaning-making for perpetrators of homicide. *Aggression and Violent*

    Behavior, 34, 263-272. https://doi.org/10.1016/j.avb.2016.11.009

Frazer, E., Mitchell, R. A., Nesbitt, L.S., Williams, M., Mitchell, E.P., Williams, R.A., &

Browne, D. (2018). The violence epidemic in the African American community: A call by the national medical association for comprehensive reform. *Journal of the National Medical Association*, *110(1),* 4-15. https://doi.org/10.1016/j.jnma.2017.08.009

Fuchs, T. (2018). Presence in absence, The ambiguous phenomenology of grief. *Phenomenology Cognitive Science, 17*, 43-63. https:/doi.org/10.1007/s11097-017-956-2

Guest, G., Bunce, A., & Johnson, L. (2006). How many interviews are enough? An experiment with data saturation and variability. *Field Methods, 18(1),* 59-82, https://doi.org/10.10.1177/1525822X05279903

Harvey, H. H., & Weary, G. (1984). Current issues in attribution theory and research. *Annual Review of Psychology*, *35*(1), 427–459. https://doi.org/10.1146/annurev.ps.35.020184.002235

Hawkins, S. (2017). Programs and services for black male survivors of community violence: What's effective? *Journal of Child & Adolescent Trauma, 10(2),* 139-145. https://doi.org/ 10.1007/s40653-017-0147-y

Heidegger, M. (1962). *Being and time* (J. Macquarrie & E. Robinson, Trans.). Harper & Row.

Hetey, R. C., & Eberhardt, J. L. (2018). The numbers don't speak for themselves: Racial disparities and the persistence of inequality in the criminal justice system. *Association for Psychological Science, 27(3),* 183-187. https://doi.org/10.1177/0963721418763931

Holliday, A. (2016). *Doing & writing a qualitative research.* Sage.

Huggins, C., & Hinson, G. (2020). Signs of traumatic grief, lack of justice, magnitude of loss, and signs of resilience following the homicidal loss of their adult child among Caribbean Black mothers. *OMEGA-Journal of Death and Dying, 0(0),* 1-21. https://doi.org/10.1177/0030222820921013

Huggins, C., Hinkson, G., and Charles, K. (2020). He was a good boy: The Caribbean Black mothers' experience of coping and grief with the homicide of their sons in Trinidad. *Journal of Black Studies, 51(5),* 411-432. https://doi.org/10.1177/0021934720915441

Huh, H. J., Kim, K. H., Lee, H-K, Chae, J-H (2020). Attachment style, complicated grief and post-traumatic growth in traumatic loss: The role of intrusive and deliberate rumination. *Psychiatry Investigation, 17(7), 636-644.* https://doi.10.30772/pi.20189.021

Jacobs, K. A., Wellman, A. R. P., Fuller, A. M., Anderson, C. P., & Jurado, S. M. (2016). Exploring the familial impact of cold case homicides. *Journal of Family Studies, 22(3),* 256-271. https://doi.org/10.1080/13229400.2015.1065195

Janusz, B., Peräkylä, A. (2021). Quality in conversation analysis and interpersonal process recall. *Qualitative Research in Psychology*, 18(3), 426-449, https://doi.org.10.1080/14780887.2020.1780356

Johnson O., St. Vil, C., Gilbert, K. L., Goodman, M., Johnson, C. A. (2019). How neighborhoods matter in fatal interaction between police and men of color. *Social Science & Medicine, 220,* 226-235.

https://doi.org/10.1016/j.socscimed.2018.11.024

Johnson, S. K., & Armour. M. P. (2016). Finding strength, conform, and purpose in

spirituality after homicide. *Psychology of Religion and Spirituality, 8(4)*, 277-288.

https://doi.org/10.1037/rel0000090

Johnson, S. K., & Zitzmann, B. (2021). Use of spirituality to make sense of loss by

homicide. *OMEGA-Journal of death and dying*, *84*(2), 673-699.

https://doi.org/10.1177/0030222820907422

Johnson, S. K., and Zitzman, B. (2020). A grounded theory of the process of spiritual

change among homicide survivors. *OMEGA-Journal of Death and Dying, 81(1),*

37-65. https://doi.org/10.1177/0030222818755285

Joseph, K., Turner, P., Barry, L., Cooper, C., Danner, O., Enumah, S., Hayanga JW, A.,

James, I., Oppong, B., Gibson, C. Q., Stanford, A., Thomas, Y., Weaver, W. L.,

Williams, M., Young, C., Britt. L. D. (2018). Reducing the impact of violence on

the health status of African Americans: Literature review and recommendations

from the society of Black Academic Surgeons. *The American Journal of Surgery*

216, 393-400. https//doi.org/10.1016/j.amjsurg.2018.08.001

Kelley, H. H., & Michela, J. L. (1980). Attribution theory and research. *Annual Review of*

Psychology, *31*, 457–501. https://doi.org/10.1146/annurev.ps.31.020180.002325

Korstjens, I., Moser, A. (2018). Series: Practical guidance to qualitative research. Part 4:

Trustworthiness and publishing. *European Journal of General Practice, 24(1),*

120-124. https://doi.org/10.1080/13814788.2017.1375092

Krohne, H. W. (2002). Stress and coping theories. Retrieved August 9, 2022, from

https://poliklinika-harni.hr/images/uploads/440/teorije-nastanka-stresa.pdf

Lazarus, R. S., Folkman, S. (1984). *Stress, Appraisal and Coping*. New York, NY,

Springer Publishing Company

Lee, J. R. S., Hunter, A. G., Priolli, F., Thornton, V. J. (2020). "Pray that I live to see

another day": Religious and spiritual coping with vulnerability to violent injury,

violent death, and homicide bereavement among young black men. *Journal of*

Applied Developmental Psychology, 70.

https://doi.org/10.1016/j.appdev.2020.101180

Lichtenfeld, S., Maler, M. A., Buechner, V. L., and Capo, M. F. (2019). The influence of

decisional and emotional forgiveness on attributions. *Frontiers in Psychology.*

10(1425). https://doi.org/10.3389/fpsyg.20199.01425

Lo, C. C., Howell, R. J., Cheng, T. C. (2012). Explaining Black-White differences in

homicide victimization. *Aggression and Violent Behavior 18,* 125-134.

https://dx.doi.org/10.1016/j.avb.2012.11.006

Maguire, M., Delahunt, B. (2017). Doing a thematic analysis: A practical, step-by-step

guide for learning and teaching scholars. Retrieved April 6, 2022, from

https://ojs.aishe.org/index.php/aise-j/article/view/335

Malle, B. F. (2008). Fritz Heider's legacy: Celebrating insight, many of them

misunderstood. *Social Psychology, 39(3),* 163-173.

https://doi.org/10.10.1027/1864-93335.39.3.163

Malle, B. F., Ickes, W. (2000). Fritz Heider: Philosopher and psychologist. *Portraits of*

Pioneers in Psychology 4, 195-214.Washington, DC: American Psychology

Association. Retrieved September 22, 2021, from

https://research.clps.brown.edu/SocCogSci/Publications/Pubs/Malle_Ickes_(2000)_Heider.pdf

Mastrocinque, J. M., Metzger, J. W., Madeira, J., Lang, K., Pruss, H., Navratil, P. K., Sandys, M., Cerulli, C., (2015). I'm still left here with the pain: Exploring the consequences of homicide on families and friends. *Homicide Studies 19(4),* 326-349. https://doi.org/10.1177/1088767914537494

McDevitt-Murphy, M. E., Zakarian, R. J., Luciano, M. T., Olin, C. C., Mazzulo, N. N., Neimeyer, R. A. (2021). Alcohol use and coping in a cross-sectional study of African American homicide survivors. *J Ethn Sust Abuse, 20(1),* 135-150. https://doi.org/10.1080/1080/15332640.2019.1598905

Merriam, S. B., Tisdell, E. J. (2016). *Qualitative research: A Guide to Design and Implementation (4th ed.).* Wiley Brand

Merriam-Webster. (n.d.). Community. In *Merriam-Webster.com dictionary*. Retrieved August 2, 2022, from https://www.merriam-webster.com/thesaurus/community

Merriam-Webster. (n.d.). Loved one. In *Merriam-Webster.com dictionary*. Retrieved August 2, 2022, from https://www.merriam-webster.com/dictionary/loved%20one

Metzger, J. W., Mastrocinque, J. M., Navratil, P. Cerulli, C. (2015). Improving systematic response in the face of homicide: Family and friends of homicide victims service needs. *Violence and Victims, 30(3).* https://doi.org/10.1891/0886-6708

Mastrocinque, J. M., Metzger, J. W., Lang, K. Pruss, H. Navratil, P. K., Sandys, M. and

Cerulli, C. (2015). I'm still left here with the pain: Exploring the health consequences of homicide on families and friends. *Homicide Studies, 19(4),* 326-349. https://doi.org/10.1177/1088767914537494

Minkov, M., Beaver, K. (2016). A test of life history strategy theory as a predictor of criminal violence across 51 nations. *Personality and Individual Differences, 97,* 186-192. https://doi.org.ezp.waldenulibrary.org/10.1016/j.paid.2016.03.063

Moustakas, C (1994). *Phenomenological research methods.* Sage.

Nowell, L.S., Norris, J., M., White, D. E., Moules, N.J. (2017). Thematic analysis: Striving to meet the trustworthiness Criteria. *International Journal of Qualitative Methods 16*: 1-13. https://doi.org/10.1177/1609406917733847

Padgett, D. (2017). *Qualitative methods in social work research*. Sage.

Padilla, R. V. (1994a). *Qualitative analysis with HyperQual2*. Chandler: AZ.

Pahl, K., Williams, S. Z., Lee, J. Y., Jospeh, A., Blau, C. (2020). Trajectories of violent victimization predicting PTSD and comorbidities among urban ethicnic/racial minorities. Journal of Counseling and Clinical Psychology, 88(1), 39-47. http:/dx.doi.org/10.1037/ccp0000449

Papero, D. V. (2017). Trauma and the family: A systems-oriented approach. *Australian and New Zealand Journal of Family Therapy*, *38*(4), 582-594.

Patton, M.Q. (2015). *Qualitative research & evaluation methods: Integrating theory and practice (4th ed.).* Sage.

Peffley, M., Hurwitz, J., and Mondak, J. (2017). Racial attributions in the justice system and support for punitive crime policies. *American Politics Research, 45(6),* 1032-

1058. https://doi.org/10.1177/1532673X17692326

Pietkiewicz, I., Smith J. A. (2014). A practical guide in using interpretative

phenomenological analysis in qualitative research study. *Czasopismo*

Psychologizne Psychological Jornal, 20(1), 7-14.

https://doi.org/10.14691/CPPJ.20.1.7

Pizzaro, J., Terrill, W., LoFaso, C.A., (2020). The impact of investigation strategies and

tactics on homicide clearance. *Homicide Studides, 24(1)* 3-4.

https://doi.org.10.1177/1088767918816741

Peoples, K. (2020). *How to write a phenomenological dissertation. A step-by-step guide.*

Qualitative research methods, Sage.

Rando, T. A. (1988). *How to go on living when someone you love dies,* Lexington Books

Reed, M. D., Dabney, D. A., Tapp, S. N., & Ishoy, G. A. (2019). Tense relationships

between homicide co-victims and detectives in the wake of murder. *Deviant*

Behavior. https://doi.org/10.10.1080/01639625.2019.1574256

Rheingold, A. A., & Williams, J. L. (2015). Survivors of Homicide: Mental health

outcomes, social support, and service use among a community-based sample.

Violence and Victims, 30(5), 870-883. https://doi.org/10.1891/0886-6708.VV-D-

14-00026

Rodham, K., Fox, F., Doran, N. (2015). Exploring analytical trustworthiness and the

process of reaching consensus in interpretative phenomenological analysis: Lost

in transcription. International Journal of Social Research Methods, 18(1), 49-71.

https://dx.doi.org/10.1010/13645579.2013.852368

Rubin A., Babbie, E. (2005). Research methods for social work. Southbank, Victoria,

    Australia; Thomson Learning.

Rubin, H. J., & Rubin I., S. (2012). *Qualitative interviewing: The art of hearing data (3rd*

    ed.). Sage

Shenton, A. K. (2004). Strategies for ensuring trustworthiness in qualitative research

    projects. *Education for Education,* 22, 63-75.

Smid, G. E. (2020). A framework of meaning attribution following loss. European

    Journal of Psychotraumatology, 11(1).

    https://doi.org/10.1080/20008198.2020.1776563

Scharp, K. M., & Sanders, M. L. (2018). What is a theme? Teaching thematic analysis in

    qualitative communication research methods.

    https://doi.org/10.1080/17404622.2018.1536794

Schober, D. J., Hunt, B. R., Benjamins, M. R., Saiyed, N. S., Silva, A., De Maio, F. G.,

    Homan, S. M. (2020). Homicide mortality inequities in the 30 biggest cities in the

    U.S. *American Journal of Preventive Medicine, 60(3)* 327-

    https://www.sciencedirect.com/science/article/pii/S0749379720304426

Seabrook, R. Wyatt-Nichol, H. (2016). The ugly side of America: Institutional oppression

    and race. *Journal of Public Management & Safety, 23(1),3.* Retrieved July 15,

    2022, from https://digitalscholarship.tsu.edu/jpmsp/vol23/iss1/3

Sharpe, T. L., (2015). Understanding the sociocultural context of coping for African

    American Families members of homicide victims: A conceptual model. *Trauma,*

    violence, & Abuse, 16(1), 48-59. https://doi.org/10.1177/15248380135155760

Sheats, K. J., Irving, S. M., Mercy, J. A., Simon, T. R., Crosby, A. E., Ford, D. C.,

Merrick, M. T., Annor, F. B., Morgan, R. E. (2018). Violence-related disparities

experienced by Black youth and young adults: Opportunities for prevention.

American Journal of Preventive Medicine, 55(4), 462-469.

https://doi.org/10.1016/j.amepre.2018.05.017

Sheats, K. J., Wilson R. F, Lyons B. H., Jack S.P., Betz C. J., Fowler K. A. (2022).

Surveillance for Violent Deaths – National Violent Death Reporting System, 39,

States, the District of Columbia, and Puerto Rico, 2018. *MMWR Surveill Summ

71*(3); 1-44. http://dx.doi.org/10.15586/mmwr.ss7103a1

Shento, A. K. (2004). Strategies for ensuring trustworthiness in qualitative research

project. *Education for Information, 22(2),* 63-75. https://doi.org/10.3233/EFI-

2004-22201

Smith, J. A., Flowers, P., Larkin, M. (2009). *Interpretative Phenomenological Analysis.*

Sage.

Smith, J. R., Patton, D. U. (2016). Posttraumatic stress symptoms in context: Examining

trauma responses to violent exposures and homicide death among Black males in

urban neighborhoods. *American Journal of Orthopsychiatry, 86(2),* 212-223.

https://doi.org/10.1037/0rt0000101

Spilsbury, J. C., Phelps, N. L., Zatta, E., Creeden, R. H., and Regoeczi, W. C. (2017).

Lessons learned implementing community-based comprehensive case

management for families surviving homicide. *Child & Family Social Work, 22,*

1161-1174. https://doi.org/10.1111/cfs.12333

Stewart, E. A., Warren, P. Y., Hughes, C., and Brunson, R. K. (2017). Race, ethnicity,

and criminal justice contact: Reflections for future research. *Race and Justice,*

10(2), 119-149. https://doi.org/10.1177/2153368717738090

Stein, C. H., Abraham, K. M., Bonar, E. E., McAuliffe, C. E., Fogo, W. R., Faigin, D. A.,

Raiya, H. A., and Potokar, D. N. (2009). Making meaning from personal loss:

Religious, benefit finding, and goal-oriented attributions. *Journal of Loss and*

Trauma 14, 83-100. https://doi.org/10.1080/15325020802173819

Tasker, S. L. (2021). How satisfied are siblings of homicide victim police? *The Police*

Journal: Theory, Practice and Principles, 94(2), 138-165.

https://doi.org/10.1177/0032258X20918624

Thiel, D. (2016). Moral truth and compounded trauma: The effects of acquittal of

homicide defendants on the families of the victims. *Homicide Studies, 20(3),* 199-

219. https://doi.org/10.1177/1088767915600200

Thompson, R. (2002). Reporting the results of computer-assisted Analysis of Qualitative

Research Data. *Forum: Qualitative Social Research*, *3*(2). Retrieved June 20,

2021, from

https://ezp.waldenulibrary.org/login?url=https://search.ebscohost.com/login.aspx?

direct=true&db=edsdoj&AN=edsdoj.4ab328f0e94cf396dd181f5474ab90&site=ed

s-live&scope=site.

Thomson, N. F. (1977). Coping with job loss: An attributional model. *The Journal of*

Psychology, 131(1), 73-80. https://doi.org/10.1080/00223989709603505

Tilstra, A. M., Gutlin, I., Dollar, N. T., Rogers, R. G. (2022). Outside the skin: The

persistence of Black-White disparities in U.S. early-life morality. *Robert A. Hummer Demography* 59(6), 2247-2269. https://doi.org/10.1215/00703370-10346963

Tubig, P., McCusker, D. (2021). Fostering the trustworthiness of researchers: SPECS and the role of the ethical reflectivity in novel neuotchnology research. *Research Ethics,* 17(2), 143-161. https://doi.org/10.1177/1747016120952500

Turner, D.W. (2010). Qualitative interview design: A practical guide for novice investigators. *The Qualitative Report, 15(3),* 754-760. Retrieved June 20, 2021, from https://search-proquest-com.ezp.waldenulibrary.org/docview/578480397?accountid=14872

Turner, H. A., Finkelhor, D. Henly, M. (2018). Exposure to family and friend homicide in a nationally representative sample of youth. *Journal of Interpersonal Violence,* 1-30. https://doi.org/10.1177/0886260518787200

The U.S. Department of Justice, Office of the United States Attorney District of Columbia (2013). Coping after homicide: A guide for family & friends. Retrieved April 8, 2022, from https://www.justice.gov/sites/default/files/usao-dc/legacy/2013/08/07/coping_after_homicide.pdf

Umberson, D. (2017). Black death matter: Race relationship, loss, and effects on survivors. *Journal of Health and Social Behavior, 58(4),* 405-420. https://doi.org/10.1177/0022146517739317

Unnever, J. D., Stults, B. J., Messner, S. F. (2021). Structural racism and criminal violence: An analysis of state-level variation in homicide. *Race and Justice,* 1-30.

https://doi.org/10.1177/21533687211015287

Updegrove, A., Boisvert, D. L., Cooper, M. N., and Gibbidon, S. L. (2020).

Criminological explanations, race, and biological attributions of crime as

predictors of Philadelphia area resident's support for criminal justice policies.

Crime & Delinquency, 67(3), 319-343.

https://doi.org/10.1177/0011128720931437

VandenBos, G. R. (Ed.). (2009). *APA college dictionary of psychology*. American

Psychological Association.

van Denderen, M., de Keijser, J., Huisman, M., and Boelen, P. A. (2016). Prevalence and

correlates of self-related post-traumatic stress disorder and complicated grief in a

community-based sample of homicidally bereaved individuals. *Journal of*

Interpersonal Violence, 31(2), 207-227.

https://doi.org/10.1177/0886260514555368

Viers, D. (2007). *The group therapist's notebook: Homework, handouts, and activities*

for use in psychotherapy. Routledge

Violence Policy Center. (2021). Black homicide victimization in the United States: An

analysis of 2018 homicide data. Retrieved March 15, 2022, from:

https://vpc.org/studies/blackhomicide21.pdf

Weiner, B. (2008). Reflections on the history of attribution theory and research: People,

personalities, publications, problems. *Social Psychology 39(3),* 151-156.

Retrieved October 19, 2021, from file:///C:/Users/Owner/Downloads/2008_-

_Reflections_on_the_History_of_Attribution_Theory_and_Research-with-cover-

page-v2%20(2).pdf

White K. (2019). Whose lives matters?: Race, space, and the devaluation of victims from black neighborhoods in homicide reporting. *Conference Paper, American Sociological Association,* 1-24. Retrieved November 4, 2021, from https://search-ebscohost-com.ezp.waldenulibrary.org/login.aspx?direct=true&db=edo&AN=141311270&site=eds=live&scope=site

Wilson, B. L., Wolfer, T. A., Wooten, N. R., Pitner, R., Moore, S. E., & Anders, A. D. (2023). "Am I Next?": A qualitative study of Black college students' experiences of stress, trauma, and grief from exposures to police killings. *Journal of Human Behavior in the Social Environment, pg.1-33.* https://doi.org/10.1080.10911359.2023.2173353

World Health Organization (2017). Violence info: Homicide who global health estimates (2015 update). Retrieved November 11, 2022, from https://apps.who.int/violence-info/homicide/

World Health Organization-Assessment Instrument for Mental Health System. (2011). WHO-AIMS reported on mental health systems in the Caribbean. World Health Organization.

Violence Policy Center. (2021). Black homicide victimization in the United States: An analysis of 2018 homicide data. Retrieved August 8, 2022, from https://vpc.org/studies/blackhomicide21.pdf

Appendix A: Research Interview Guide

Questions and Probes	Sources
1. Tell me about what happened to your (family member or friend). What happened? (probe for when the homicide happened)	Baker et al. (2019); Bartol & Bartol (2017)
a. Where were you during the event? After?	Berthelot et al. (2016); Burrell et al. (2021)
b. What do you remember about hearing about what happened when you first heard?	Ferrito et al. (2017); Stewart et al. (2017)
c. What was the experience of hearing the news like for you?	Joseph et al. (2020); Viers (2007)
d. What did that mean to you?	Bucholz (2019); Durosini et al. (2017)
2. How did you find out? How were you notified?	

a. What was your experience like with the local police (whoever?) when you were notified?
    b. Can you give me an example?
    c. What did that mean to you?
	Brantingham & Uchida (2021); Hetey & Eberhardt (2018); Johnson et al. 2019); Vincent et al. (2015)

3. Is there anything else you would like to share about how you felt or what it meant when you first got the news?	
4. We will move on to talk about what happened in the investigation of the homicide. Can you tell me what happened?	Brantingham & Uchida (2021); Unnever et al. (2021)
a. Did you speak with the police? Or investigators? What was that like?	Edwards et al. (2021); Reed et al. (2016)
b. What was your experience of that/those interactions? Can you give me an example?	Bucholz (2002)
c. What did those interactions mean to you?	Sharp (2015)
d. Were you notified that they had someone in custody? If so, how? Can you tell me what happened?	Sheats et al. (2018)
e. What was that like for you?	
f. Did you speak with anyone regarding the trial? Prosecutors? Victim Advocates? What was that like?	Hetey & Eberhardt (2018)
g. What was your experience of that/those interactions? Can you give me an example?	Connell et al. (2015)
5. Is there anything else you would like to share about your interactions with the police and the courts?	
6. We will move on to talk about your grief and how you are feeling now. 7. Tell me about your grieving experience. What was the most difficult part? 8. What is grieving like for you now? a. Can you give me an example?	Baguley et al. (2020); Fuchs (2018); Huggins & Hinkson (2020); Mastrocinque et al. (2015); Turner et al. (2018); Smid (2020); U.S. Department of Justice (2013)

a. How do you share your grieving with the people around you? (probe: family, friends) b. How do they feel about your grieving experience? c. Is there anything else you would like to share about your grieving process?	Alves-Cost et al. (2019); Englebrecht et al. (2016)
d. Now we are shifting from the grief process (the emotions and feelings of loss) to how you cope, like what you did and how you sought help. e. Can you share something about your coping?	Bailey et al. (2013); Boelen et al. (2017); Neria & Litz (2004).
f. Can you describe how you cope? g. Can you give an example? h. What is this like for you? i. Some people find healthy coping methods (e.g., exercising or volunteering at an organization). While others may find unhealthy coping methods (e.g., using alcohol or drugs or withdrawing from your everyday or favorite activities.). Can you tell me about your coping strategies?	Huggins (2017); Johnson & Armour (2016); Johnson & Zitmann (2020); Lee et al. (2020), McDevitt-Murphy et al. (2021)
j. What kind of services have you received to help you cope? k. How helpful are those services?	Das et al. (2021); Joseph et al. (2018); Schober (2021)
9. Is there anything else you would like to share regarding grieving or coping with your loss?	
10. We will move on to talk about your current relationship with the community after the traumatic loss. Can you tell me what that is like for you? 11. How would you describe your community and the people in your community?	Edward et al. (2021); Hawkins (2017); Johnson et al. (2019)
a. Who in your community reaches out to you? Churchs? Schools? Community Services/Programs? What was that like? b. What have you experienced in your community's response to your loss? c. Can you give me an example?	Baily et al. (2021); Das et al. (2021); Denderden et al. (2016); Diehr & McDaniel (2018); Metzger et al. (2015); Umberson (2017)
d. What was your experience of that/those interactions? Can you give me an example?	Light & Ulmeer (2016); Lo et al. (2013)
12. Is there anything else that you would like to share about your loss, your grief, or how you cope? 13. Because of your experiences, is there anything you would recommend to others who are going through this terrible loss?	

Appendix B: Codes and Occurrence

Interview Transcript

Codes	Occurrence throughout interviews by participant number
1. Disbelief	1,4,5,6,8
2. Overwhelmed	1,4
3. Confused	1,2,4,6,7
4. Angry	1,2,3,4,5,6,7,8
5. Optimistic (loved one was still alive)	3,6,8
6. Feeling weird	1
7. Upset	1,2,3
8. Loneliness/Felt alone	4,6,7
9. Unbelievable	2,4, 8
10. Self-blame	1,2,3
11. Depression	8
12. Acceptance	6,7
13. Uncontrollable outburst	1
14. Enraged	3,5
15. Helpless	6, 7
16. Denial	8
17. Hysteria	1
18. Guilt	1,2,3,8
19. Hard to accept	8
20. Unable to move on	2
21. Searching for answers	3
22. Isolation	2,4
23. Traumatized	6
24. Outraged	3,5
25. Hurt	2,4
26. Scared	1,5
27. Negative thoughts	3,5
28. Coming to terms with the loss	6,7
29. Worldview has changed	4,7
30. Powerless	8
31. Closed in – out of control	8
32. In a Fog	8
33. Emotional scene	7,8
34. Fainted/Passed out	5
35. Breakdown	2,3
36. Checked out	3

37. Advocate	3,4,7
38. Alcohol	2,3,5,7,8
39. Angel Day	3,4
40. Poor Job	1,2,3,5
41. Lack of empathy/compassion from police and detectives	1,2,3,4,5,7,8
42. Bad situation	4,6
43. Depressed	8
44. Plea bargain	1,4,5
45. Unsolved crime	5,6
46. No Justice	2,3,4,5,6
47. Healthy coping strategies	6,7,8
48. Unhealthy coping strategies	1,2,3,4,5,6,7,
49. Found resources Support	2
50. Spiritual	1,3,6
51. Going out of my mind	5
52. Moving on	3,4,5,6,7
53. Found Therapy on their own	1,3,4,5,7,8
54. Normalcy/normal life	3,4
55. Reminded of loved one	1,6,7
56. Drugs	3,5,8
57. Slept a lot	1,2,8
58. Constantly crying	1,2, 4
59. Unsupported/ no services offered or provided -	8
60. No compassion	1,2,3,
61. Checking off boxes	7,8
62. Trying To get back to normal routine	3,4,5,7
63. Racist	3,5,8
64. Homicide victim's past/dehumanizing	5,3,8
65. No level of humanity for loved one	5,3, 8
66. Re-traumatized	5,3, 8
67. Financial issues	1,2,4
68. Hysteria (screaming)	1
69. Felt stuck	1,4,7
70. Racial issues	1,2,3,4,5,7,8
71. Panic attacks	1
72. Didn't eat/over ate	1,4
73. Trouble sleeping	6
74. Heart hurt/beating fast	2,6
75. Community	1,2,4,7
76. Grieved alone, didn't share their grief	1,2,4,5,6,7,8

77. Had to be strong	1,2,3,4,
78. Depressing state	7
79. Dissatisfied with CJS	1,2,3,4,5,7,8
80. Satisfied with CJS	6
81. Chaotic	5,6,8
82. Community Organizations	3
83. Drugs	3,5,8
84. No one wants to talk about death	4,8
85. Resentment	3,4,5,7
86. Consumes you	3
87. Memory/honoring your loved one	3,4
88. Anxious	6,7,
89. Anxiety	1,2,5
90. You don't have to be strong	1
91. Anger	2,3,4,7
92. Unreal	2
93. Didn't cry	3
94. Trying to deal with the homicide	3, 6, 7
95. Became real	2,6,7
96. Fighting an inner battle	6
97. Thrown off balanced	7
98. Street code (no snitching or telling)	2,3
99. Homicide (gun)	2,3,4,5,6,7,8,
100. Homicide (knife/beat)	1
101. Life has changed	8