Summer 8-24-2024

Finding the Silver Lining: The Role of Supportive Social Environments

Keturah Platt
DePaul University, kplatt2@depaul.edu

Finding the Silver Lining: The Role of Supportive Social Environments in Posttraumatic Growth Outcomes among Bereaved Adolescents

A Dissertation

Presented in

Fulfillment of the

Requirement for the Degree of

Doctor of Philosophy

By

Keturah Jedidah Platt

August 2024

Department of Psychology

College of Science and Health

DePaul University

Chicago, IL

Dissertation Committee

Kathryn Grant, Ph.D., Chairperson

Jocelyn Carter, Ph.D.

Leonard Jason, Ph.D.

Leodis Scott, Ed.D.

Kashica J. Webber-Ritchey, Ph.D., MHA, RN, FAHA

Acknowledgments

First and foremost, I would like to thank God for providing me with the strength and comfort needed to successfully complete my doctoral journey. I am deeply grateful for the unwavering support of my mother, my incredible family, my partner, my friends, my graduate school colleagues, and the many systems of support that have surrounded me. I also extend my heartfelt thanks to my entire dissertation committee: Dr. Kathryn Grant, Dr. Jocelyn Carter, Dr. Leonard Jason, Dr. Leodis Scott, and Dr. Kashica Webber-Ritchey for their invaluable guidance and support on this passion project. It truly takes a village, and together, we made it happen.

Biography

Keturah Jedidah Platt was born in Oakland, California. She graduated from Castlemont High School in Oakland, California. She acquired her Bachelor of Arts degree in Psychology and double minored in Child and Family Development and Counseling and Social Change from San Diego State University in 2017. After graduating with her undergraduate degree, Keturah began and completed the Clinical-Community Psychology PhD program at DePaul University.

Table of Contents

List of Tables

Abstract

Experiencing a significant loss can be one of the most challenging life experiences. The adverse effects of bereavement can disrupt a person's overall health and well-being. While it is essential to fully acknowledge the negative outcomes of bereavement, it is equally important to recognize the potential for posttraumatic growth (PTG) following such experiences. PTG has been consistently observed in adults who have experienced various traumas, yet there is still much to learn about PTG among adolescents. Given that death is one of the most stressful life events for youth, bereaved adolescents are a crucial population for examining PTG. Those living in urban areas are of particular concern due to their heightened exposure to community violence, which can increase susceptibility to traumatic events and experiences of loss. Having support during times of trauma and loss can help reduce psychological distress. Therefore, to gain a better understanding of growth processes amid the death of a loved one, this study examines the types of social support received by an urban adolescent population.

A total of 408 adolescents (46.6% male; 53.4% female) in grades six through 12 participated in this study, recruited from three urban schools. Data collection included the Post Traumatic Growth Measure for the growth outcome variable, the Losing People in the Past measure to assess students' experiences of loss, and the Places I Spend Time measure to assess social support. Hierarchical linear regression analysis was used to assess multiple supportive social environments on PTG outcomes in the context of bereavement. The results indicated that home social support significantly predicted growth across all five PTG domains. In contrast, school and faith-based settings (e.g., churches, mosques, or other religious settings) also predicted PTG outcomes but to a lesser extent. The interaction between social support and bereavement was not significant across the models. These findings underscore the pivotal role of

home environments in fostering PTG among urban adolescents, suggesting that strengthening home-based support systems is important, especially in settings where youth face compounded stressors. Future research should explore the longitudinal effects of support and additional contextual factors to better understand the dynamics of PTG in this population.

Finding the Silver Lining: The Role of Supportive Social Environments in Posttraumatic Growth Outcomes among Bereaved Adolescents

Chapter I: Introduction

By adolescence, it is likely that an individual has either witnessed or experienced death firsthand. According to Johnson, Torres, Sykes, Gibson, and Baker (2017), most adolescents (71%) have experienced a loss by the time they graduate from high school. The death of a loved one can disrupt an adolescent's assumptions that their world is predictable, relatively stable, and safe (Burdett & Schiavone, 2009; Pérez-Sales, 2010). The adverse effects of bereavement may include, but are not limited to, shock, numbness, guilt, confusion, depression, and a sense of hopelessness (Ens & Bond, 2007). Further reactions to the loss of a loved one include yearning for the deceased and elevated symptoms of multiple forms of psychopathology (Keyes et al., 2014; Tedeschi & Calhoun, 2004).

Bereavement can profoundly challenge an adolescent's mental, emotional, social, and physical well-being, especially during a period of vulnerability, as adolescence is often when mental health disorders first emerge (Kessler et al., 2012). Notably, nearly one in four to five adolescents experience a mental health problem during this critical stage (Kessler et al., 2012). Experiencing a death during this transitional period between childhood and adulthood adds another layer of stress during a time when significant developmental changes are simultaneously taking place (Burris, 2016). To assess the impact of bereavement on an adolescent's development, researchers suggest taking a holistic approach by considering multiple factors such as the circumstances of the death, the relationship to the deceased, accessibility to emotional support, and religious and cultural connections (Robin & Omar, 2014). While the absence of

these supports can negatively impact adolescent bereavement, their presence often provides essential resources for coping and healing. Emotional support from family, friends, and community, as well as religious and cultural connections, can offer comfort, guidance, and a sense of meaning, helping to mitigate the adverse effects of loss and foster posttraumatic growth.

Adolescents encounter various types of losses, ranging from family to other personal relationships. Previous research by this author has shown that urban adolescents experienced the death of family members (41.5%), non-family members (1.3%), and friends or significant others (18.5%) (Platt, 2021). The death of family members and friends or romantic partners was most prevalent in this prior study. Causes of death ranged from sickness or disease (26.3%), elderly age (15%), accident and/or disaster (6.4%), murder (4.6%), and suicide (3.8%) (Platt, 2021). These losses can be categorized as either expected, such as those resulting from sickness, disease, or elderly age, or unexpected, including accidents, disasters, murders, and suicides. Research suggests that expected deaths may allow for some emotional preparation, whereas unexpected deaths often result in more intense shock and grief reactions due to their sudden nature (Cohen & Mannarino, 2011; Kaplow et al., 2014). The death of a loved one, regardless of its nature, can profoundly impact an adolescent's physical and mental health, leading to increased risks of depression, anxiety, and other health issues (Robin & Omar, 2014). However, bereavement can also lay the groundwork for posttraumatic growth, as adolescents navigate their grief and find new ways to understand their experiences and relationships (Tedeschi & Calhoun, 2004).

Although death is an inevitable part of life and can lead to unfavorable consequences, solely focusing on pathological responses paints a one-sided picture of the bereavement period

for adolescents. Positive change has been reported in approximately 30 to 70 percent of survivors of various traumatic events, including bereavement (Linley & Joseph, 2004). For example, in the Platt study cited above, 76% of bereaved adolescents indicated signs of posttraumatic growth (Platt, 2021). Systematic investigations of growth are recent in the research literature, but the idea of significant positive changes following major challenges, suffering, and loss isn't a new concept. Tedeschi and Calhoun (2004) argue that early teachings of various religions, including Christianity, Hinduism, Buddhism, and Islam, contain aspects of the potentially transformative power of trials and tribulations (Tedeschi & Calhoun, 1995).

In addition to acknowledging religious roots for the idea of growth following adversity, it is also important to distinguish growth from resilience. Resilience usually refers to an ability to persevere through life after experiencing hardships (Tedeschi & Calhoun, 2004). Despite experiencing tough circumstances, resilient individuals demonstrate a stable trajectory of healthy functioning over time (Bonanno, 2004). In contrast to resilience, growth exceeds these levels of adaptation and implies an advance from an individual's baseline levels of functioning (McGrath, 2006). It is expressed as improved interpersonal relationships, changed self-perception, and a shift in philosophy of life (McGrath, 2006).

According to McGrath, most psychological theories that attempt to explain growth outcomes share a common notion that growth involves the reorganization of assumptions or cognitive schemas. Shattered assumptions theory focuses on the destructive nature trauma has on an individual's belief system (Schuler & Boals, 2016). This includes disruptions in perceptions of self-worth and changed views regarding the benevolence and meaningfulness of the world (Janoff-Bulman, 1989). For bereaved individuals, beliefs about the predictability and

controllability of the world can be shattered through experiencing untimely and violent deaths (Gerrish, Dyck, & Marsh, 2009). For growth to occur, these shattered assumptions need to be re-established or discarded and replaced with a broader worldview that is better able to make meaning of suffering.

In times of stress or adversity, one way to establish a sense of predictability, stability, and opportunity for meaning-making is through social support (Cohen & Wills, 1985). Social support can change an individual's appraisal of a stressful situation and reduce their physiological response to stress (Cohen & Wills, 1985). During the aftermath of traumatic events, including bereavement, receiving support from others plays an important role in reconstructing cognitive schemas and narratives that embody growth-related themes (Tedeschi & Calhoun, 2004).

The current study examines trauma and loss through the lens of positive psychology, exploring the construct of posttraumatic growth among bereaved adolescents living in urban areas. Youth residing in urban communities often experience a unique set of stressors, including exposure to community violence, economic hardship, and limited access to mental health resources (Evans et al., 2013; Santiago et al., 2011). These stressors can accumulate daily and over time, creating an environment of chronic stress that impacts their emotional and psychological well-being. Despite these challenges, some adolescents manage to derive meaning and achieve growth outcomes when experiencing the death of a loved one, largely through the support they receive from family, peers, and community resources (Kilmer et al., 2010). The current study aimed to understand how social support contributes to these positive outcomes, shedding light on the strength of urban youth who navigate significant losses while facing the everyday adversities of their environments.

Posttraumatic Growth

Growth or positive change has been observed in individuals following trauma and/or bereavement. The current author's prior study found that bereavement was significantly and positively associated with PTG among bereaved urban adolescents (Platt, 2021). PTG represents positive psychological changes that occur from struggling to handle highly stressful circumstances (Tedeschi & Calhoun, 2004). There are five domains within this construct: (a) a greater appreciation of life, such as the recognition of things formerly taken for granted; (b) more meaningful and close relationships with others, as well as an increased sense of compassion for those who have experienced similar hardships; (c) a general sense of increased strength, including accepting that bad things happen and discovering that "if I handled this, then I can handle just about anything"; (d) identifying new and different possibilities for life, such as taking on a career path influenced by the loss experience; and (e) spiritual and existential growth, where there can be greater engagement with fundamental existential questions or the belief that God comforted them through their grapple with stress and loss (Tedeschi & Calhoun, 2004).

Growth does not occur as a direct result of trauma but rather through trying to make sense of a new reality in the aftermath of trauma (Tedeschi & Calhoun, 2004). Cognitive rebuilding takes place as an individual incorporates their experienced trauma and possible future events into schemas that become more resistant to being shattered (Tedeschi & Calhoun, 2004). These reconstructed schemas determine the extent to which posttraumatic growth occurs (Tedeschi & Calhoun, 2004). On the other hand, if a bereaved individual cannot take in new information and rebuild their schemas, posttraumatic stress disorder (PTSD) could develop. Trauma involves

shattered assumptions, but PTG is a schema reconstruction process that fosters a sense of meaning and growth (Gerrish et al., 2009).

There is a growing body of research examining adolescent PTG. Correlational studies reveal evidence of posttraumatic growth among adolescent cancer patients and ethnically diverse young people following the September 11th terrorist attacks (9/11) (Milam et al., 2005; Turner-Sack, Menna, & Setchell, 2012). Milam and colleagues (2005) found that one-third of adolescent participants experienced positive changes in their relationships, self-reliance, spirituality, life priorities, and appreciation of life post-9/11. Although not statistically significant, earlier work conducted by Milam et al. (2004) also found that experiencing the death of a parent predicted higher PTG scores than other negative life events (e.g., parental divorce/separation, loss of a close friend, being held back a grade). Thus, bereavement-related stress has the potential to contribute to higher levels of growth compared to other life stressors.

One limitation of the current author's previous bereavement study was that it examined adolescents' overall sense of growth outcomes when experiencing bereavement rather than examining the various domains that characterize PTG. A more focused analysis is important because prior studies have found effects specific to particular PTG domains. The current study provides a richer picture of the experience of PTG by examining the construct of each domain (i.e., new possibilities, relating to others, appreciation of life, personal strength, and spiritual change).

Identification with organized religion and having discussions with family and friends about a stressful life event (e.g., terrorist attack) have been shown to contribute to PTG among a racially and ethnically diverse group of adolescents (Milam et al., 2005). Laufer and Solomon

(2006) also found that religious Israeli youth reported higher levels of PTG compared to their secular counterparts. In a subsequent study (Laufer & Solomon, 2009), religious youth strongly endorsed items corresponding to the spiritual change and appreciation of life domains of PTG following terrorist attacks. Religiosity and drawing closer to God or a Higher Power can not only strengthen one's spirituality but also provide a set of beliefs to make meaning from trauma (Milam et al., 2004). The current study examined social support across multiple settings, including home, school, and faith-based settings (e.g., churches, mosques, or other religious environments) as this has important implications for nurturing supportive social environments and interventions that foster PTG outcomes.

Social Support

Social support has been shown to include multiple components such as (a) information that one is cared for and loved, (b) information that one is esteemed and valued, and (c) information that one belongs to a group (Michael & Cooper, 2013; Pearson, 1986). Social support is protective for adolescent distress (Camara, Bacigalupe, & Padilla, 2017), alleviating the impact of stressful events and increasing well-being (Cohen & Wills, 1985). Social support systems that are correlated with growth outcomes in the context of adolescent bereavement include support from either a parent and/or guardian (Wolchik et al., 2009). Findings suggest that parents and guardians may offer ideas about how to reconstruct schemas and make meaning of an experienced death or loss (Wolchik et al., 2009). Moreover, supportive relationships may foster PTG by providing perspectives that can be integrated into reconstructed schemas (Prati & Pietrantoni, 2009). Parents and guardians may also provide opportunities for self-disclosure and validation of painful feelings related to the loss (Wolchik et al., 2009). Kimhi and colleagues

(2009) found evidence of the relationship between family support and growth outcomes among Israeli adolescents exposed to war-related trauma. Researchers have also examined social support in regard to quantity and quality following earthquake trauma (Shang et al., 2022). Interestingly, findings suggested that low-quality support had an adverse effect on PTG while high-quality social support facilitated PTG (Shang et al., 2022).

The protective role of social support on PTG outcomes has also been shown in the current author's prior bereavement study. Findings revealed that social support significantly predicted PTG scores and explained the greatest amount of variance in PTG (11.8%) compared to other predictor variables, including bereavement, demographic factors (age, gender, and race/ethnicity), active coping, and rumination (Platt, 2021). Total social support scores were used in this previous study to get a general idea of the relationship between social support and PTG alongside these other variables. The current study builds upon that work by focusing on social support, the most powerful predictor of PTG, and examines the nature of different types of social support received among bereaved urban youth and their relationship to various PTG domains.

Bereavement in Low-Resourced Urban Environments

Given the disproportionate rates of violent death in United States urban areas, there is a great need to assess its impact on bereaved individuals living in these environments. Urban adolescents are subjected to an immense number of traumas and severe life stressors, including community violence. The average annual violent crime rate in urban areas is about 74% higher than the rural rate and 37% higher than the suburban rate (McCart et al., 2007). Social determinants of violence include residential segregation, racism and discrimination, educational disparities, high unemployment rates, poverty, and overcrowding (Eitle, D'Alessio, &

Stolzenberg, 2006; LaVeist, 2005; Stewart & Simons, 2010). Community violence exposure includes not only being a victim of violence but also witnessing others, such as friends and family members, being victimized by violence (Liu, Bolland, Dick, Mustanski, & Kertes, 2015).

In a representative study of urban adolescents, 31% of sixth-grade boys and 14% of girls had someone threaten to kill them; 42% of boys and 30% of girls saw someone shot; and 87 to 96% of both boys and girls witnessed arrests, saw others being beaten up, or heard gunfire (Farrell & Bruce, 1997). Fitzpatrick and Boldizar (1993) also found that among urban youth aged 7-19, 43% witnessed a murder.

Due to urban adolescents' environmental circumstances of social and economic disadvantage in their communities, they are more vulnerable to experiences of sudden and violent deaths. This includes the loss of a loved one to homicide, suicide, or accident (Smith, 2014). These types of losses share common features of suddenness and violence, but each has its unique characteristics. Compared to those bereaved by accidents or suicide, those bereaved by homicide exhibit higher levels of prolonged grief disorder (PGD) and PTSD (Currier, Holland, & Neimeyer, 2006; Murphy, Clark Johnson, Wu, Fan, & Lohan, 2003). Close relatives of homicide victims also carry the additional burden of contact with the criminal justice system (Gintner, 2001). Additionally, individuals bereaved by suicide often report higher levels of grief-specific symptoms, such as rejection, shame, stigma, and blame, and they may be more likely to avoid disclosing the cause of death of their loved one (Sveen & Walby, 2008). Sudden and violent losses not only make it difficult for individuals to grasp the reality that their loved one has passed, but there is also a common reaction of experiencing guilt (Lehman, Wortman, & Williams, 1987). Relative to other types of losses, sudden and violent losses hinder the bereaved

from saying a final goodbye (Kristensen et al., 2012). Sudden, unexpected, or violent loss of a loved one has been shown to be one of the most common life events leading to PTSD and more persistent depressive symptoms (Brent, Melham, Donohoe, & Walker, 2009; Breslau et al., 1998; Kaltman & Bonanno, 2003; Van Ameringen, Mancini, Patterson, & Boyle, 2008).

Although youth growing up in urban neighborhoods are more likely to experience sudden and violent loss, not all of these adolescents develop maladaptive outcomes. Positive changes may emerge, such as adolescents developing a more positive perspective on life (Arpawong et al., 2015). After experiencing any type of death (i.e., sudden and unexpected or seemingly natural and anticipated), negative outcomes should be acknowledged, but so should the possibility of growth. While experiencing PTSD, for example, a personal narrative of life before and after the trauma can develop and result in positive changes in identity (Tedeschi, 1999). Growth requires a level of traumatization, and as new meanings are developed, cognitive disruption characteristic of posttraumatic stress can strengthen core beliefs and schemas or result in new beliefs and schemas that provide greater meaning for times of suffering (Ickovics et al., 2006). The current study focused on social support predictors of these processes in urban adolescents due to their higher risk of experiencing violent trauma (Tedeschi, 1999).

There is very little published research on factors related to growth outcomes among urban adolescents, but at least two studies have highlighted significant predictors of PTG outcomes in this population. In a quantitative research study among urban adolescent girls, the type of traumatic event was related to subscales of PTG (Ickovics et al., 2006). Participants in this study who reported interpersonal problems as their most significant trauma reported a lesser degree of PTG than adolescents who reported bereavement as their most traumatic experience (Ickovics et

al., 2006). Urban girls who identified an interpersonal problem reported significantly lower levels of growth in the appreciation of the life domain of PTG compared to those who experienced bereavement (Ickovics et al., 2006). The death of a loved one was also one of the most common traumatic events experienced by urban youth (Ickovics et al., 2006), further highlighting the uncontrollable stressors experienced by young people in urban communities. This study was limited by solely examining urban adolescent girls. The current study builds on previous research to consider growth outcomes in both male and female urban adolescents. The current study also includes a more representative sample, better reflecting the diverse population of U.S. adolescents, since PTG research has mostly been conducted with adults and adolescents from specific populations (e.g., adolescent girls, specific racial and ethnic minority groups, and adolescents residing outside the United States).

In addition to Ickovics and colleagues' (2006) study, the current author's prior study examined PTG-related variables in the context of bereavement among urban youth (Platt, 2021). As mentioned earlier, bereavement experiences were significantly associated with PTG scores, such that adolescents who reported higher levels of death-related losses also reported high levels of PTG. The study also examined several predictors of PTG, and social support emerged as the most powerful predictor (Platt, 2021). The current study built upon those findings by focusing specifically on social support as a predictor of PTG among urban youth. In particular, it explored the different kinds of supportive social environments available to urban youth and their relationship to each PTG domain. Understanding the role of social support in PTG is important for developing interventions that promote PTG among youth exposed to high rates of stress and trauma.

Rationale and Current Study Hypotheses

Although the literature has established the adverse effects of residing in urban contexts and experiencing bereavement, there has been growing interest in further understanding psychological growth, religion and spirituality, and positive outcomes following the loss of a loved one (Balk, 1999; O'Rourke, Tallman, & Altmaier, 2008; Park & Helgeson, 2006; Shaw, Joseph, & Linley, 2005; Tedeschi & Calhoun, 2004; Wortmann & Park, 2008). Loss of a close relationship through death has traditionally been viewed from a deficit-based lens, but this current study sought to understand bereavement from a strength-based perspective, focusing particularly on how social support could catalyze PTG.

There is limited research on PTG in response to experiences of loss among adolescents (Johnson et al., 2017; Ringler & Hayden, 2000). Most of the empirical literature has focused on growth-related outcomes following the diagnosis of life-threatening illnesses such as cancer or HIV in adults (Ickovics et al., 2006). While this research provides valuable insights into the contexts of PTG, there remains a need to explore PTG among urban adolescents and examine how supportive social environments can facilitate PTG in this population. The current study addressed these gaps by investigating six research questions, outlined below.

Research Questions. RQ1. Which contexts or settings provide the most support (home vs. school vs. other)? RQ2. What other contexts or settings are reported as supportive? RQ3. What types of support are most frequently reported in each setting? RQ4. Which domains of PTG are most frequently reported? RQ5. Are particular social support settings associated with particular PTG domains? RQ6. Do relationships among bereavement, social support, and PTG vary as a function of PTG domain?

Statement of Hypotheses

Hypothesis I:

a) Adolescents who report higher levels of received social support within the context of home will report higher levels in all five PTG domains.

b) Social support received within the home will interact with bereavement to predict additional PTG in all five domains.

Hypothesis II:

a) Adolescents who report higher levels of received social support within the context of school will report higher levels in all five PTG domains.

b) Social support received within the school will interact with bereavement to predict additional PTG in all five domains.

Hypothesis III:

a) Adolescents who report higher levels of received social support within the context of a faith-based setting will report higher levels in all five PTG domains.

b) Social support received within a faith-based setting will interact with bereavement to predict additional PTG in all five domains.

Chapter II: Methods

Participants

A total of 408 adolescents in grades six through 12 participated in this study. Participants were recruited from three diverse urban schools in the United States (two K-8th grade schools and one high school). The sample included representation from 228 census tracts, 23 crime districts, and 148 police beats. Approximately 46.6% of the sample identified as male and 53.4% as female. Racial and ethnic backgrounds were as follows: 34.6% Hispanic/Latinx, 34.3%

African American/Black, 18.1% European American/White, 11% Asian or Asian American, 2.5% American Indian or Alaskan Native, 0.5% Native Hawaiian or Other Pacific Islander, 15% Bi-Racial or Multiracial, and 14.5% identifying as Other.

Procedure

All measures and protocols in this study received approval from the Institutional Review Boards at DePaul University and Northwestern University. Adolescent participants underwent a full day of data collection at DePaul University on one of five consecutive Saturdays during the fall of 2012. Consent and assent forms were obtained from all participants. Participants were randomly assigned to various measures and tasks throughout the day. Activities included breakfast, lunch, and dinner breaks, as well as relaxation and recreation periods, short movies, college information sessions, and a campus tour. At the conclusion of data collection, participants received a $50 gift card to Target, Old Navy, or Best Buy. An additional $20 in gift cards was provided to participants who returned parent rating forms ($10 for themselves and $10 for their parents). The measures utilized in the current study are summarized below.

Measures

Post-traumatic growth. The Posttraumatic Growth measure is an 11-item scale designed to assess positive psychological changes following exposure to trauma. Participants were first prompted to recall a bad experience or traumatic event (Kimhi et al., 2009). Subsequent items were rated on a four-point Likert scale ranging from "no change" (0) to "a lot of change" (3), with higher scores indicating greater levels of perceived change. Sample questions include "I learned how nice and helpful some people can be," "I can now handle big problems better than I used to," and "I know what is important to me better than I used to" (Kimhi et al., 2009). Each subscale comprises two items, with possible scores ranging from 0 to 6 per domain. For example,

items for New Possibilities include (a) “I now have a chance to do some things I couldn’t do before” and (b) “I have new ideas about how I want things to be when I grow up.” Items for Relating to Others include (a) “I learned how nice and helpful some people can be” and (b) “I feel closer to other people (friends or family) than I used to.” Items for Appreciation of Life include (a) “I understand how God works better than I used to” and (b) “I appreciate (enjoy) each day more than I used to.” Items for Personal Strength include (a) “I can now handle big problems better than I used to” and (b) “I have learned that I can deal with more things than I thought I could before.” Items for Spiritual Change include (a) “I understand how God works better than I used to” and (b) “My faith (belief) in God is stronger than it was before.” Total scores were computed for each PTG domain as well as for the overall PTG measure by summing the item responses within each domain, resulting in a possible overall score range from 0 to 33, with higher total scores representing greater perceived growth. The internal consistency of the subscales in the present sample was strong, with Cronbach’s alpha values of 0.81 for New Possibilities, 0.81 for Relating to Others, 0.80 for Appreciation of Life, 0.82 for Personal Strength, and 0.92 for Spiritual Change.

Bereavement. The Losing People in the Past measure (Duffy et al., 2022; Grant et al., 2022) is a 50-item scale used to assess adolescents’ experiences of loss and characteristics of bereavement. Participants first indicated whether they had lost someone close to them. If they had experienced such a loss, they were asked to provide detailed descriptions regarding up to two individuals. These descriptions included specifying the relationship to the deceased, the circumstances surrounding the loss, and the frequency of communication both before and after the loss. The measure includes a variety of loss types, such as death due to old age, accidents, or murder, and other causes. The scoring focused specifically on bereavement due to death, which

is critical to the study's focus on posttraumatic growth in response to loss. For each participant, a total bereavement score was computed based on the number of death-related bereavement experiences reported. This was done by summing responses to items related to death (e.g., "dying in an accident or disaster," "being murdered," "dying of old age," "killing themselves"). The total bereavement score reflects the cumulative number of death-related losses, with possible values ranging from 0 (indicating no death-related loss) to a maximum score based on the number of losses reported by the participant. Higher scores indicate a greater exposure to death-related bereavement. This measure has been validated in previous research and has demonstrated strong psychometric properties (Grant et al., 2022), making it a reliable tool for assessing bereavement in adolescents.

Social Support. Social support was assessed using the Places I Spend Time measure (Duffy et al., 2022; Grant et al., 2022), a 126-item scale that uses a 3-point rating system (1 = never or hardly ever, 2 = sometimes, 3 = a lot) to assess adolescents' perceptions of social support in various settings: home, school, and an additional setting outside of home and school where they spend the most time. Sample items include: "Someone helps me when things go wrong," "someone helps me to not give up," and "someone shows me that good can come from bad," "someone gives me good advice," "someone knows what is going on with me," someone helps me develop a faith or philosophy," and "I learn what to do with something I can't change." For each setting (home, school, and other settings), sum scores were computed by adding the responses to the items specific to that context, with possible scores ranging from the minimum score (reflecting little to no perceived support) to the maximum score (indicating high levels of perceived support). Sum scores were used instead of mean scores to capture the cumulative level of support experienced, providing a comprehensive measure of total perceived support in each

setting. Higher scores reflect greater perceived availability of support within that particular setting. The internal consistency of the scale was high across all settings, with Cronbach's alpha values of 0.97 for home, 0.97 for school, and 0.99 for the additional protective setting, demonstrating the reliability of the measure in assessing perceived social support.

Data Analysis Plan

The current study used a cross-sectional design to examine the role of various settings in providing social support in relation to the various domains of PTG in the context of bereavement affecting urban adolescents. The specific analyses that were used to answer each research question and test each hypothesis are provided below. The support variables were calculated as sum scores of the responses to individual support-related items, chosen over mean scores to better capture the cumulative level of support experienced by the participants and to build upon prior literature in this area (Platt, 2021). Descriptive statistics also included demographic variables (age, gender, and racial/ethnic identity) to assess their influence on primary study variables, highlighting potential demographic patterns and informing how background characteristics may affect PTG outcomes. Analyses controlled for these demographic variables, ensuring a more accurate examination of the relationship between social support and PTG. Regression analyses tested both main effects and interaction effects within the same models to comprehensively assess the independent and combined impacts of social support and bereavement on PTG.

Research Questions

Research Question 1 (RQ1): Which contexts or settings provide the most support (home vs. school vs. other)? To answer RQ1, paired sample t-tests were conducted to compare

the mean levels of perceived support across the three settings: home, school, and other. These comparisons were based on the Places I Spend Time measure.

Research Question 2 (RQ2): What other contexts or settings are reported as supportive? To address RQ2, open-ended responses from the Places I Spend Time measure were reviewed to identify additional supportive settings selected by the youth. The responses were categorized by generating themes, assigning numerical codes, and then analyzing these categories to understand the broader range of socially supportive environments reported by the participants.

Research Question 3 (RQ3): What types of support are most frequently reported in each setting? For RQ3, a frequency analysis was conducted for each support-related item within the home, school, and other settings as measured by the Places I Spend Time instrument. This analysis identified the most commonly reported types of support in each context.

Research Question 4 (RQ4): Which domains of PTG are most frequently reported? To explore RQ4, a frequency analysis was also used to determine the prevalence of PTG across its domains: new possibilities, relating to others, appreciation of life, personal strength, and spiritual change.

Research Question 5 (RQ5): Are particular social support settings associated with particular PTG domains? To address RQ5, a correlation matrix was used to examine the associations between different social support settings—home, school, and other—and various PTG domains, including new possibilities, relating to others, appreciation of life, personal strength, and spiritual change. The analysis focused on identifying statistically significant correlations by assessing the p-values, which determined the significance of these associations. Additionally, the strength and direction of the correlations were evaluated to understand how

different support settings relate to specific PTG domains. This analysis provided valuable insights into which settings were more strongly connected to particular aspects of posttraumatic growth.

Research Question 6 (RQ6): Do relationships among bereavement, social support, and PTG vary as a function of PTG domain? To address RQ6, which examines whether the relationships among bereavement, social support, and PTG differ across various PTG domains, hierarchical multiple regression was employed as the primary analytical method. This approach allowed for the step-by-step inclusion of variables, enabling the observation of how the addition of interaction terms influenced the variance explained in PTG outcomes. Specifically, the analysis controlled for demographic variables such as age, gender, and race/ethnicity to account for their potential influence on PTG. These control variables were entered in the first step of the regression model, isolating the effects of bereavement and each social support setting. The interaction term between bereavement and social support was then introduced in the second step to assess whether the relationship between social support and PTG differed depending on the level of bereavement experienced. A significant interaction would suggest that the effect of social support on PTG varies at different levels of bereavement. The overall model fit was evaluated using R-squared and adjusted R-squared values, and the significance of the interaction term was determined by its p-value, indicating whether it significantly contributed to explaining PTG beyond the main effects.

Chapter III: Results

Research Question 1 (RQ1): Which contexts or settings provide the most support (home vs. school vs. other)?

A paired-samples t-test was conducted to compare the means for social support received at home and school. Results revealed a significant difference in the level of support between home ($M = 1.43$, $SD = 0.47$) and school ($M = 1.18$, $SD = 0.50$); $t(364) = 9.68$, $p < 0.001$. On average, home scores were 0.26 points higher than school scores, with a 95% confidence interval ranging from 0.20 to 0.31. When comparing support received within the home setting ($M = 1.43$, $SD = 0.47$) and an additional place outside of the home ($M = 1.39$, $SD = 0.56$), the results did not show a significant difference; $t(83) = 2.24$, $p = 0.089$. Conversely, when comparing support received within the school setting ($M = 1.18$, $SD = 0.50$) and an additional place outside of the home ($M = 1.39$, $SD = 0.56$), a significant difference was observed; $t(83) = -2.19$, $p = 0.031$. The negative t-value indicates that support received in the additional place outside of the home was significantly higher than that received in the school setting.

Research Question 2 (RQ2): What other contexts or settings are reported as supportive?

The Places I Spend Time measure identified additional settings chosen by youth for their third protective setting, addressing Research Question 2. Open-ended responses were analyzed to identify themes, which were then coded numerically to represent categories. Some youth mentioned home and school settings in these responses, and these are included with all other coded responses in Table 1. Additionally, the 'Other' category included settings that were difficult to classify into predefined categories. Examples of such settings included vague or unconventional locations like 'hot place' and 'on the bus,' as well as various job settings that did not fit neatly into the other established categories. Table 1 presents a complete list of these categories.

Table 1

Perceived Support in Other Settings: Frequency of Occurrence

Category	Frequency	Percentage
Other (Non-Parent) Family Member's House	30	19.0%
Faith-Based Setting	22	13.9%
Friend's House	20	12.7%
Hobby/Leisure (Non-Sports)	18	11.4%
Parent's House	15	9.5%
Outside/Outdoor Activity	13	8.2%
Sports Club/Sporting Goods Store/Gym Facility	11	7.0%
Other	8	5.1%
School	7	4.4%
Library	5	3.2%
After School Program	4	2.5%
Romantic Partner’s House	3	1.9%
Home	2	1.3%

Research Question 3 (RQ3): What types of support are most frequently reported in each setting?

Research Question 3 (RQ3) explores the types of support most commonly reported in each setting. This analysis involved conducting a frequency analysis for each item within the domains of home, school, and other as identified in the Places I Spend Time measure. Additionally, mean comparisons were conducted to assess the prevalence and significance of reported support types across these settings. Results for the five most frequently reported types of support are provided in Table 2.

Table 2

Perceived Support in Home Settings: Frequency of Occurrence

Places I Spend Time-Home	Never or Hardly Ever	Sometimes	A lot
Someone teaches me to do the right thing.	4.0%	25.2%	68.6%
I learn to notice the good things and be grateful.	4.8%	31.1%	62.7%
I learn to be kind to others.	6.4%	27.6%	64.9%
Someone shows me how to learn from mistakes.	7.0%	28.2%	63.8%
Someone helps me to not give up.	8.0%	29.2%	61.9%

A frequency analysis was conducted to examine the distribution of participant responses across various types of support received within the home. Adolescent participants predominantly experienced 'a lot' of support within their homes. Specifically, 256 participants (68.6%) reported being taught by someone to 'do the right thing'. Additionally, 234 participants (62.7%) indicated receiving of support in learning the importance of gratitude and noticing 'good things' in their lives. Furthermore, 242 participants (64.9%) endorsed learning 'to be kind to others' within their home, while 238 participants (63.8%) reported that someone within their home shows them how to 'learn from mistakes'. Moreover, 231 participants (61.9%) shared that someone helps them to 'not give up'. These responses reflect relatively high levels of support among adolescent participants while spending time within their homes. Approximately 25 to 31% of participants reported 'sometimes' receiving the listed support within their home. Lastly, 4 to 8% of adolescents reported 'never or hardly ever' receiving the listed support within their home (see Table 2).

Table 3

Perceived Support in School Settings: Frequency of Occurrence

Places I Spend Time-School	Never or Hardly Ever	Sometimes	A lot
Someone tells me that it is okay to need help.	10.2%	41.8%	46.9%
I get help solving a problem.	7.8%	48.5%	41.8%
Someone teaches me to do the right thing.	10.7%	44.8%	42.9%
Someone teaches me to work hard.	11.3%	45.6%	41.3%
I learn to be kind to others.	12.1%	46.4%	39.9%

A frequency analysis was conducted to examine the distribution of participant responses across various types of support received at school. Table 3 presents a varied distribution of perceived support among the participants. The majority of participants reported receiving reassurance that it is okay to need help often, with 46.9% indicating "A lot," 41.8% "Sometimes," and 10.2% "Never or Hardly Ever." Similarly, 41.8% of participants indicated they received help solving problems "A lot," while 48.5% reported "Sometimes," and 7.8% "Never or Hardly Ever." In terms of being taught to do the right thing, 42.9% of participants reported receiving this support "A lot," 44.8% "Sometimes," and 10.7% "Never or Hardly Ever." Participants (41.3%) frequently received encouragement to work hard “A lot", 45.6% reported this support "Sometimes," and 11.3% "Never or Hardly Ever." Lastly, 39.9% of participants indicated they learned to be kind to others "A lot," 46.4% "Sometimes," and 12.1% "Never or Hardly Ever.” Overall, the analysis reveals that a significant proportion of students receive frequent support in various forms at school, particularly in areas such as being told it is okay to need help and receiving help to solve problems, with a substantial portion also reporting this support at least sometimes (see Table 3).

A comparison between the data collected on support received within participants' home and school environments reveals notable differences. While a significant proportion of participants reported receiving 'a lot' of support within their home across various domains,

ranging from 61.9% to 68.6%, the frequency of support received within their school setting appears to be comparatively lower. For instance, the highest level of support reported within the school environment was for someone telling participants that it is okay to need help, with 46.9% of participants indicating 'a lot' of support in this area. Nonetheless, this proportion is lower than the reported frequency of support received for similar statements within the home setting. Additionally, lower percentages of participants reported receiving 'a lot' of support for other domains within their school, ranging from 39.9% to 42.9%. Furthermore, while the proportions of participants reporting 'sometimes' receiving support within their home (25-31%) and school (41.8-48.5%) settings are closer, the percentage of participants reporting 'never or hardly ever' receiving support within their school (7.8-12.1%) is consistently higher than within their home (4-8%). These findings suggest that participants perceive receiving more support within their home environment compared to their school environment (see Tables 2 and 3).

Table 4

Items with the Largest Mean Differences in Perceived Support between Home and School Settings

Statement	Mean Difference	t-value	df	p-value
Someone helps me develop a faith or philosophy	0.43	9.51	363	<.001
Someone helps me when things go wrong	0.38	9.68	367	<.001
Someone tells me I don’t have to be perfect	0.37	8.39	366	<.001
I get help with things I am afraid or ashamed of	0.36	8.65	364	<.001
Someone helps me to not give up	0.34	7.80	366	<.001

Additionally, a paired samples t-test was conducted to compare the levels of perceived support between home and school settings across 30 statements. The analysis revealed significant differences for 27 statements, all of which were in favor of the home setting, indicating that more support was perceived at home. There were significant differences across all items except for three items: 1) "I get help solving a problem," 2) "Someone helps me practice

something I am learning," and 3) "Someone tells me it is okay to fail." See the appendix for all significant differences. The significant differences across the majority of the statements indicate varying levels of perceived support between home and school settings.

Overall, the results indicate that participants generally felt more supported in the home setting compared to the school setting across various domains of perceived support. This was evident in statements related to emotional support, guidance, and moral instruction. Although 30 statements were analyzed to assess perceived support, only the five statements with the most significant differences are included in Table 4 for clarity and conciseness.

Research Question 4 (RQ4): Which domains of PTG are most frequently reported?

Research Question 4 (RQ4) aims to identify the domains of PTG most frequently reported by individuals. This analysis involved conducting a frequency analysis to determine the prevalence of PTG across its domains, namely new possibilities, relating to others, appreciation of life, personal strength, and spiritual change.

Table 5

Prevalence of Perceived Posttraumatic Growth Across Domains

Statement	PTG Domain	No Change	A little	Some	A lot
I know what is important to me better than I used to.	Appreciation for Life	11.75%	20.63%	34.60%	33.02%
I appreciate (enjoy) each day more than I used to.	Appreciation for Life	17.31%	22.12%	27.56%	33.01%
I have new ideas about how I want things to be when I grow up.	New Possibilities	17.53%	17.53%	28.25%	36.69%
I now have a chance to do some things I couldn’t do before.	New Possibilities	20.26%	20.58%	30.23%	28.94%
I can now handle big problems better than I used to.	Personal Strength	13.06%	24.52%	30.89%	31.53%

I have learned that I can deal with more things than I thought I could before.	Personal Strength	16.08%	25.08%	27.65%	31.19%
I feel closer to other people (friends or family) than I used to.	Relating to Others	17.63%	20.51%	31.09%	30.77%
I learned how nice and helpful some people can be.	Relating to Others	17.98%	24.92%	31.23%	25.87%
I understand how God works better than I used to.	Spiritual Change	35.90%	15.38%	18.27%	30.45%
My faith (belief) in God is stronger than it was before.	Spiritual Change	37.42%	16.77%	20.65%	25.16%

The percentages reported in this analysis reflect the combined totals for the "Some" and "A lot" categories (see Table 5). The distribution of responses for each PTG domain statement, including Appreciation for Life, New Possibilities, Personal Strength, Relating to Others, and Spiritual Change, is summarized in Table 5. The most frequently reported domain of PTG among adolescents was New Possibilities. Most (64.94%) of adolescents reported having new ideas about their future, and 59.17% noted they had new opportunities they couldn’t access before. Appreciation for Life was also a prominent domain, with 67.62% of adolescents stating they better understand what is important to them, and 60.57% appreciating each day more than they used to. The domain of Personal Strength showed notable growth, with 62.42% of adolescents feeling they could handle big problems better and 58.84% realizing they could manage more than they previously thought possible. Relating to Others was another key domain, with 61.86% of adolescents feeling closer to friends or family, and 57.10% learning how nice and helpful some people can be. In contrast, the least reported domain was Spiritual Change. Only 48.72% of adolescents felt they better understood how God works, and even fewer (45.81%) felt their faith in God had strengthened.

Research Question 5 (RQ5): Are particular social support settings associated with particular PTG domains?

A correlation matrix was conducted to examine associations between social support settings and various domains of PTG — namely, new possibilities, relating to others, appreciation of life, personal strength, and spiritual change. This analysis aimed to explore whether specific social support settings (home, school, other) are correlated with different PTG domains. The correlation analysis revealed several significant relationships between perceived support in different settings and various measures of post-traumatic growth, as well as notable correlations involving demographic variables (see Table A1). Significant associations between variables are summarized below.

Home and School Support Settings and Posttraumatic Growth

Significant correlations were observed between social support settings and PTG domains. Specifically, the sum of home support was significantly positively correlated with PTG domains: Appreciation of Life ($r = .37$, $p < .001$), New Possibilities ($r = .30$, $p < .001$), Personal Strength ($r = .37$, $p < .001$), Spiritual Change ($r = .34$, $p < .001$), and Relating to Others ($r = .35$, $p < .001$). Similarly, sum of school support showed significant positive correlations with these PTG domains: Appreciation of Life ($r = .26$, $p < .001$), New Possibilities ($r = .16$, $p = .009$), Personal Strength ($r = .23$, $p < .001$), Spiritual Change ($r = .21$, $p < .001$), and Relating to Others ($r = .23$, $p < .001$). These findings suggest that higher levels of home and school support are associated with greater perceived growth across multiple domains of PTG among participants.

Perceived Support in Other Settings and Post-Traumatic Growth

Similarly, the sum of scores for settings outside of home and school (categorized as "other") showed significant positive correlations with several PTG domains: Appreciation of Life ($r = .32$, $p = .037$), and Personal Strength ($r = .36$, $p = .016$).

Faith-Based Support Settings and Post-Traumatic Growth

Faith-based support settings represent the largest category of other settings identified by youth, so this variable was also examined separately in the correlation matrix. Faith-based support was significantly correlated with several dimensions of PTG. Specifically, faith-based support was positively correlated with Appreciation of Life ($r = .17$, $p = .042$), Spiritual Change ($r = .23$, $p = .006$), and Relating to Others ($r = .17$, $p = .042$). These results indicate that greater involvement in faith-based settings is associated with higher levels of perceived growth in these domains among participants.

Demographic Variables and Post-Traumatic Growth

Significant correlations were observed between various demographic variables and measures of support and PTG. For example, the sum of home support was positively correlated with being African American/Black ($r = .16$, $p < .05$), and the sum of school support was positively correlated with being African American/Black ($r = .15$, $p < .05$) and negatively correlated with being Bi-Racial or Multiracial ($r = -.12$, $p < .01$). Faith-based support was also positively correlated with being Native Hawaiian or Pacific Islander ($r = .20$, $p < .01$). Additionally, age was negatively correlated with being African American/Black ($r=-12$, $p<.01$). Regarding PTG, being African American/Black was positively correlated with the post-traumatic growth Spiritual Change score ($r = .22$, $p < .05$).

Primary Analyses
Hypothesis I:

a) Adolescents who report higher levels of received social support within the context of home will report higher levels in all five PTG domains.

b) Social support received within the home will interact with bereavement to predict additional PTG in all five domains.To test Hypothesis 1, hierarchical regression analysis was employed to assess the predictive ability of home social support, bereavement, and their interaction term on the five sub-domains of PTG, while controlling for relevant demographic variables associated with the outcomes.

Appreciation of Life PTG subdomain: The Appreciation of Life PTG domain was the first subdomain assessed. The results indicated significant main effects for PTG-Appreciation of Life, with home social support ($\beta = 0.37$, SE = 0.01, $t(259) = 6.20$, $p < .001$) and bereavement ($\beta = 0.12$, SE = 0.11, $t(260) = 2.11$, $p = 0.04$) both showing notable associations. Specifically, a one-unit increase in the standard deviation of bereavement corresponded to a 0.23 unit increase in the Appreciation of Life PTG domain. Similarly, a one-unit increase in the standard deviation of home social support corresponded to a 0.05 unit increase in the same PTG domain.

The overall model fit was significant ($F(11, 259) = 4.65$, $p < .001$), explaining 13% of the variance in PTG-Appreciation of Life (adj. $R^2 = 0.13$). However, the interaction between home social support and bereavement did not significantly contribute to the regression model with the Appreciation of Life PTG subdomain ($\beta = 0.24$, $p = 0.25$).

New Possibilities PTG subdomain: To further assess Hypothesis 1, the regression model was re-run, this time including the New Possibilities PTG subdomain to evaluate the predictive ability of home social support, bereavement, and their interaction term on the New Possibilities PTG domain. The results revealed significant main effects, with home social support

($\beta = 0.29$, SE = 0.01, $t(258) = 4.83$, $p < .001$) being a significant predictor of PTG-New Possibilities. Specifically, for every one-unit increase in the standard deviation of home social support, there was a corresponding increase of 0.04 units in the New Possibilities domain of PTG.

Furthermore, the overall model fit was significant ($F(11, 258) = 3.28$, $p < .001$), explaining 9% of the variance in PTG-New Possibilities (adj. $R^2 = 0.09$). However, the interaction between home social support and bereavement did not significantly contribute to the regression model with the New Possibilities PTG subdomain ($\beta = 0.24$, $p = 0.26$).

Personal Strength PTG subdomain: To further assess Hypothesis 1, the regression model was re-run, this time focusing on the Personal Strength PTG subdomain to evaluate the predictive ability of home social support, bereavement, and their interaction term on the Personal Strength PTG domain. The results revealed significant main effects, with home social support ($\beta = 0.36$, SE = 0.01, $t(258) = 6.10$, $p < .001$) emerging as a significant predictor of PTG-Personal Strength. Specifically, for every one-unit increase in the standard deviation of home social support, there was a corresponding increase of 0.05 units in the Personal Strength domain of PTG.

Furthermore, the overall model fit was significant ($F(11, 258) = 4.67$, $p < .001$), explaining 13% of the variance in PTG-Personal Strength (adj. $R^2 = 0.13$). However, the interaction between home social support and bereavement did not significantly contribute to the regression model with the Personal Strength PTG domain ($\beta = 0.21$, $p = 0.33$).

Spiritual Change PTG subdomain: To further assess Hypothesis 1, the regression model was re-run, focusing on the Spiritual Change PTG subdomain to evaluate the predictive ability of home social support, bereavement, and their interaction term on the Spiritual Change PTG

domain. The results revealed significant main effects, with higher levels of home social support ($\beta = 0.30$, SE = 0.01, $t(258) = 5.17$, $p < .001$) significantly predicting the PTG-Spiritual Change domain. Specifically, for every one-unit increase in the standard deviation of home social support, there was a corresponding increase of 0.05 units in the Spiritual Change domain of PTG. Additionally, age was a significant predictor, with every one-unit standard deviation decrease in age correlates with a decrease of 0.17 units in the PTG-Spiritual Change domain. African American/Black identity was also significantly predictive; adolescents identifying as African American/Black (coded as 1) showed an increase of 1.21 units in the PTG-Spiritual Change domain compared to the reference group.

The overall model fit was significant ($F(11, 258) = 5.82$, $p < .001$), explaining 17% of the variance in PTG-Spiritual Change (adj. $R^2 = 0.17$). However, the interaction between home social support and bereavement did not significantly contribute to the regression model with the Spiritual Change PTG domain ($\beta = 0.24$, $p = 0.25$).

Relating to Others PTG subdomain: To further investigate Hypothesis 1, the regression model was re-run, this time incorporating the Relating to Others PTG subdomain to evaluate the predictive roles of home social support, bereavement, and their interaction. The analysis revealed significant main effects, with home social support ($\beta = 0.33$, SE = 0.01, $t(261) = 5.63$, $p < .001$) significantly predicting PTG-Relating to Others. Specifically, a one-unit increase in the standard deviation of home social support corresponded to a 0.05 unit increase in the Relating to Others domain of PTG. Age also showed a significant main effect, with each one-unit standard deviation decrease in age associated with a 0.15 unit decrease in PTG-Relating to Others. Bereavement was another significant predictor, where a one-unit increase in bereavement corresponded to a 0.27 unit increase in PTG-Relating to Others.

The overall model fit was significant ($F(11, 261) = 5.08$, $p < .001$), explaining 14% of the variance in PTG-Relating to Others (adj. $R^2 = 0.142$). However, the interaction between home social support and bereavement did not significantly contribute to the regression model for the Relating to Others PTG domain ($\beta = 0.14$, $p = 0.52$).

Hypothesis II:

a) Adolescents who report higher levels of received social support within the context of school will report higher levels in all five PTG domains.

b) Social support received within the school will interact with bereavement to predict additional PTG in all five domains.

To test Hypothesis 2, hierarchical regression analysis was employed to assess the predictive ability of home social support, bereavement, and their interaction term on the five sub-domains of PTG while controlling for relevant demographic variables associated with the outcomes.

Appreciation of Life PTG subdomain: In the context of school support, the first PTG subdomain assessed was Appreciation of Life. The results indicated significant main effects for PTG-Appreciation of Life, with school social support ($\beta = 0.25$, SE = 0.01, $t(269) = 4.06$, $p < 0.001$) and bereavement ($\beta = 0.13$, SE = 0.11, $t(269) = 2.15$, $p = 0.03$) both showing significant associations. Specifically, a one-unit increase in the standard deviation of school social support corresponded to a 0.03 unit increase in the Appreciation of Life PTG domain. Additionally, a one-unit increase in the standard deviation of bereavement corresponded to a 0.25 unit increase in the same PTG domain.

The overall model fit was significant ($F(11, 269) = 2.48$, $p = 0.00$), explaining 6% of the variance in PTG-Appreciation of Life (adj. $R^2 = 0.06$). However, the interaction between school

social support and bereavement did not significantly contribute to the regression model with the Appreciation of Life PTG subdomain (β = -0.05, p = 0.75).

New Possibilities PTG subdomain: To further assess Hypothesis 2, the regression model was re-run, this time including the New Possibilities PTG subdomain to assess the main effects of school social support, bereavement, and their interaction term. The results revealed that the overall model was not significant (F(11, 266) = 1.33, p = 0.21), indicating that the predictors as a set did not significantly predict the New Possibilities PTG domain. However, there was a significant main effect of school support (β = 0.13, SE = 0.008, t(266) = 2.09, p = 0.04) within the model. The interaction between school social support and bereavement did not significantly contribute to the regression model with the New Possibilities PTG subdomain (β = 0.09, p = 0.56).

Personal Strength PTG subdomain: To further assess Hypothesis 2, the regression model was re-run, this time including the Personal Strength PTG subdomain to evaluate the main effects of school social support, bereavement, and their interaction term. The results revealed that the overall model was not significant (F(11, 267) = 1.82, p = 0.05), indicating that the predictors as a set did not significantly predict the Personal Strength PTG domain. However, school social support demonstrated a significant main effect within the model (β = 0.20, SE = 0.00, t(267) = 3.31, p = 0.00). The interaction between school social support and bereavement also did not significantly contribute to the regression model (β = -0.07, p = 0.66).

Spiritual Change PTG subdomain: To further assess Hypothesis 2, the regression model was re-run, including the Spiritual Change PTG subdomain to evaluate the main effects of school social support, bereavement, and their interaction term. The results revealed a significant main effect of school social support (β = 0.17, SE = 0.01, t(269) = 2.91, p = 0.00) on the PTG-Spiritual

Change domain. Specifically, a one-unit increase in the standard deviation of school social support corresponded to a 0.03 unit increase in the Spiritual Change PTG subdomain.

African American/Black identity was significantly predictive, with adolescents identifying as African American/Black showing an average increase of 1.33 units in the PTG-Spiritual Change domain compared to the reference group. The overall model fit was significant ($F(11, 269) = 3.84$, $p < 0.001$), explaining 10% of the variance in PTG-Spiritual Change (adj. $R^2 = 0.10$). However, the interaction between school social support and bereavement did not significantly contribute to the regression model for the Spiritual Change PTG domain ($\beta = 0.02$, $p = 0.90$).

Relating to Others PTG subdomain: To further investigate Hypothesis 2, the regression model was re-run, incorporating the Relating to Others PTG subdomain to evaluate the main effects of school social support, bereavement, and their interaction term. The analysis revealed significant main effects, with school social support ($\beta = 0.19$, SE = 0.01, $t(270) = 3.20$, $p = .00$) and bereavement ($\beta = 0.18$, SE = 0.11, $t(270) = 2.99$, $p = 0.00$) both showing significant associations. Specifically, a one-unit increase in the standard deviation of school social support corresponded to a 0.03 unit increase in the PTG subdomain Relating to Others, while a one-unit increase in the standard deviation of bereavement corresponded to a 0.34 unit increase in the same PTG subdomain.

The overall model fit was significant ($F(11, 270) = 3.12$, $p < .001$), explaining 8% of the variance in PTG-Relating to Others (adj. $R^2 = 0.08$). However, the interaction between school social support and bereavement did not significantly contribute to the regression model with the Relating to Others PTG subdomain ($\beta = 0.04$, $p = 0.79$).

Hypothesis III:

a) Adolescents who report higher levels of received social support within the context of a faith-based setting will report higher levels in all five PTG domains.

b) Social support received within a faith-based setting will interact with bereavement to predict additional PTG in all five domains.

To test Hypothesis 2, hierarchical regression analysis was employed to assess the predictive ability of faith-based social support, bereavement, and their interaction term on the five sub-domains PTG while controlling for relevant demographic variables associated with the outcomes.

Appreciation of Life PTG subdomain: The first subdomain assessed in relation to faith-based social support was the Appreciation of Life PTG domain. The results revealed that the overall model was not significant ($F(10, 126) = 0.92$, $p = 0.52$), indicating that the predictors as a set did not significantly predict the Appreciation of Life PTG domain. However, there was a significant main effect of faith-based social support, which emerged as a significant predictor of the Appreciation of Life PTG domain ($\beta = 0.18$, $SE = 0.15$, $t(126) = 2.02$, $p = 0.04$). The interaction between faith-based social support and bereavement did not significantly contribute to the regression model ($\beta = 0.02$, $p = 0.84$). Despite the overall model not providing sufficient evidence for prediction, the significant main effect of faith-based social support suggests its potential influence, although the variance explained was minimal (adj. $R^2 = -0.01$).

New Possibilities PTG subdomain: To further assess Hypothesis 3, the regression model was re-run to include the New Possibilities PTG subdomain, evaluating the main effects of faith-based social support, bereavement, and their interaction. The results indicated that the overall

model was not significant ($F(10, 127) = 0.69$, $p = 0.74$), suggesting that the predictors as a set did not significantly predict the New Possibilities PTG domain. No significant main effects were observed for any predictor, and the interaction term also did not significantly contribute ($\beta = 0.12$, $p = 0.23$), indicating that neither the main effects nor the interaction significantly explained the variance in this PTG domain.

Personal Strength PTG subdomain: To further assess Hypothesis 3, the regression model was re-run, including the Personal Strength PTG subdomain to evaluate the main effects of faith-based social support, bereavement, and their interaction. The results showed that the overall model was not significant ($F(10, 127) = 0.71$, $p = 0.72$), and no significant main effects were identified within the model. The interaction between faith-based social support and bereavement also did not significantly contribute ($\beta = 0.02$, $p = 0.87$), suggesting that none of the predictors explained significant variance in the Personal Strength PTG domain within faith-based contexts.

Spiritual Change PTG subdomain: To further assess Hypothesis 3, the regression model was re-run to examine the main effects of faith-based social support, bereavement, and their interaction on the Spiritual Change PTG domain. Although the overall model was not significant ($F(10, 126) = 1.44$, $p = 0.17$), there was a significant main effect of faith-based social support ($\beta = 0.25$, SE = 0.18, $t(126) = 2.84$, $p = 0.01$), suggesting that faith-based social support uniquely contributed to the Spiritual Change PTG domain. However, the interaction term did not significantly impact the regression model ($\beta = 0.05$, $p = 0.60$). The model's adjusted R-squared was 0.03, indicating that the predictors explained approximately 3% of the variance in this domain.

Relating to Others PTG subdomain: To further investigate Hypothesis 3, the regression model was re-run to include the Relating to Others PTG subdomain, evaluating the main effects

of faith-based social support, bereavement, and their interaction. The overall model was not significant ($F(11, 126) = 1.11$, $p = 0.36$), yet a significant main effect of faith-based social support was observed ($\beta = 0.19$, $SE = 0.15$, $t(126) = 2.15$, $p = 0.03$), suggesting a notable contribution of faith-based social support to the Relating to Others PTG domain. The adjusted R-squared for the model was 0.01, reflecting that approximately 1% of the variance was explained, underscoring the potential importance of faith-based social support in facilitating growth related to interpersonal connections.

Chapter IV: Discussion

The current study aimed to explore bereavement through a strength-based lens, focusing on how supportive social environments contribute to PTG among bereaved adolescents in urban areas of the United States. Six primary research questions guided the investigation: 1) Which settings (home, school, other) offer the most support? 2) What additional settings are perceived as supportive? 3) What types of support are most frequently mentioned in each setting? 4) Which PTG domains are most commonly reported? 5) Are specific social support settings linked to particular PTG domains? 6) Do relationships among bereavement, social support, and PTG vary across PTG domains? The results addressing each question are discussed below.

Research Question 1 (RQ1): Which contexts or settings provide the most support (home vs. school vs. other)?

Differences in Social Support Settings

Analyses addressing Research Question 1 revealed significant differences in the levels of social support between home and school settings, with participants reporting higher levels of support at home. This finding underscores the critical role of home environments as primary sources of support for adolescents, likely due to factors such as familiarity, comfort, and family

dynamics that facilitate greater perceived support. Hawley (2014) emphasizes the importance of familial relationships and dynamics within the home setting, which significantly contribute to adolescents' socialization and well-being. This aligns with the notion that home environments serve as foundational spaces where adolescents develop and maintain supportive relationships, which are crucial for their emotional and social development.

Given that adolescents living in urban environments often face unique challenges such as higher levels of stress, crime, and limited access to safe recreational spaces (Leventhal & Brooks-Gunn, 2000), the home environment becomes even more critical. Youth in these settings may rely heavily on familial support to provide stability and safety amidst external pressures (Furstenberg et al., 1999). The home can serve as a refuge from external stressors such as noise, congestion, and potential safety concerns, making it an essential source of support in urban areas. The higher reliance on home highlights the family's role in providing consistent emotional and social backing, which can be less accessible in the broader urban environment.

Moreover, extended family members can play a protective role in such environments. Research with African-American families has shown a positive association between economic stress and extended kin support, where economic strain was associated with greater assistance from relatives (Dressler, 1985). In culturally specific groups such as African Americans, extended kin networks often pool resources like money, information, and mutual emotional support (Stack, 1974; Aschenbrenner, 1973; Dressler, 1979). These extended family structures provide a crucial buffer against urban stressors, offering resources within the home that enhance resilience. Understanding these familial dynamics highlights the importance of leveraging home environments as pivotal settings for fostering adolescents' well-being, particularly in

communities where such support networks play a critical role in mitigating the effects of adversity.

The impact of home life on adolescent development is well-documented. Kamini (2023) emphasizes that the family is the primary and most crucial social group for individual development. The home environment, which includes factors such as socioeconomic status, parental expectations, and family dynamics, varies widely across different families, societies, and countries (Kamini, 2023). Amin and colleagues (2019) further supports this by showing that positive home environments—with supportive parents, appropriate discipline, and a calm atmosphere—are linked to better academic performance and reduced behavioral problems in adolescents. Similarly, Singh and Saha (2018) reported that a positive home environment, characterized by parental involvement and support, positively impacts academic achievement and mental health outcomes in adolescents. These findings underscore the importance of a supportive home environment for adolescents' moral and emotional development.

Differential Support in Home vs. School Settings

Findings from the current study suggest that participants perceive greater support within their home environment compared to their school environment, which aligns with recent research highlighting several challenges within schools that may contribute to this perception. High student-to-teacher ratios in many schools, particularly in urban areas, can limit the amount of individualized attention and support that students receive, as teachers are often stretched thin, reducing the quality of their interactions with students (Sorensen & Ladd, 2020). Additionally, teacher burnout and stress, exacerbated by heavy workloads and lack of administrative support, further diminish teachers’ capacity to provide emotional support, leaving students feeling less connected and supported in the school setting (Kim et al., 2021).

Moreover, the increasing emphasis on academic performance and standardized testing in schools has led to a narrowing of the curriculum, often at the expense of social-emotional learning and individualized student support. This academic focus can overshadow the provision of emotional support, making students perceive their school environment as less nurturing (Jones & Doolittle, 2017). Compounding these issues, the disciplinary practices and overall school climate can significantly impact students' perceptions of support. Schools that rely heavily on punitive measures, such as suspensions and expulsions, often create environments of fear and mistrust, further alienating students (Skiba et al., 2016).

Resource constraints in under-resourced schools, particularly those in low-income areas, also limit the availability of essential support services such as counseling and mental health care, contributing to students' perceptions of lower support in these environments (Darling-Hammond et al., 2020). Reife and colleagues (2020) further emphasize that adolescents residing in low-income urban areas often face significant challenges due to the unequal distribution of stressors and the limited availability of supportive adults within schools. School personnel, often dealing with stressors related to poverty, face increased stress levels, which limits their capacity to support students effectively (Cherniss & Adler, 2000; Elias et al., 2003; Evans, 2004). The COVID-19 pandemic exacerbated these challenges, as the shift to remote learning left many students feeling isolated and disconnected from their teachers and peers, with schools struggling to provide the same level of support in a virtual setting (Dorn et al., 2020). Additionally, a cultural mismatch between students and teachers, particularly in schools serving diverse populations, can lead to feelings of alienation when students perceive that their cultural backgrounds are not understood or valued by school staff (Milner, 2020). These factors

collectively illustrate why adolescents might perceive their home environments as more supportive than their school environments.

Impact of Additional Settings

Although there was no significant difference in support levels between home and an additional place outside of home, the contrast between school and these additional settings was noteworthy. Participants perceived significantly higher levels of support in these additional settings compared to school. This suggests that adolescents may seek and find supportive environments beyond traditional settings like school, possibly indicating the influence of peer groups, community resources, or other supportive networks. Eccles and Roeser (2011) emphasize the significant role of adolescents' social environments in their development and well-being, highlighting that while schools are important, peer groups and community settings also play crucial roles. Moreover, Eccles and Templeton (2002) found that extracurricular and after-school activities provide essential environments for youth to develop critical skills and social competencies outside formal educational settings.

Ozer and Weinstein (2004) also noted that supportive environments within schools and communities enhance resilience among adolescents facing community violence. These findings highlight the need to recognize and promote community and after-school settings as pivotal for fostering youth development and providing essential support structures. By acknowledging the limited support schools provide and emphasizing these additional protective settings, educators and policymakers can better support adolescents' holistic development and well-being.

Research Question 2 (RQ2): What additional settings are perceived as supportive?

Patterns of Time Allocation

Participants were asked to identify additional settings beyond the primary home and school environments to better understand where adolescents may receive social support. The data revealed that settings such as other (non-parent) family members' houses (19.0%), faith-based settings (13.9%), and friends' houses (12.7%) were frequently mentioned, suggesting these environments play significant roles in providing support. These findings align with previous research emphasizing the importance of peer interactions and family contexts beyond the immediate home environment (Hawley, 2014; Furman & Buhrmester, 1992). Additionally, hobbies or leisure activities (11.4%), parents' houses (9.5%), and outdoor activities (8.2%) were also commonly reported. These findings are supported by Eccles and Barber (1999), who highlighted the role of extracurricular involvement in adolescent development. Less frequently mentioned were sports clubs, sporting goods stores, or gym facilities (7.0%), other unspecified locations (5.1%), libraries (3.2%), after-school programs (2.5%), and romantic partners' houses (1.9%). These results suggest that adolescents allocate their time across a variety of settings, reflecting the varied nature of their social and recreational lives (Larson, 2000; Feldman & Matjasko, 2005).

Importance of Family Members and Friends

The high frequency of youth spending time at other (non-parent) family members' houses (19.0%) highlights the significance of extended family networks among adolescents. Extended family members, such as grandparents, aunts, and uncles, provide crucial support and guidance, offering opportunities for socialization, access to resources, and a sense of belonging

(McLanahan & Sandefur, 1994). This support is particularly beneficial during times of family disruption, contributing to the stability and well-being of adolescents.

In a study involving predominantly White adolescents, adolescents reported significantly more frequent contact with and enjoyment of relationships with non-parental adults (such as uncles and adult cousins) (Rishel et al., 2007). These findings highlight the importance that adolescents place on their relationships with extended family members. Furthermore, this study suggests that promoting adolescent relationships with extended family members is beneficial. Adolescents' relationships with non-parental adults are a protective factor that has received limited attention in the literature. However, this study contributes to the literature by highlighting the importance of these settings and adults among a diverse sample of adolescents residing in urban areas.

Additionally, 12.7% of adolescents indicated spending time at their friends' houses, a commonly reported setting in this study. This finding aligns with research emphasizing adolescence as a period when socializing with peers becomes increasingly important as individuals strive to assert independence from parental authority (Hawley, 2014). Families and peers are pivotal sources of support during adolescence, significantly influencing their well-being and development. Schacter and Margolin (2019) found that support from friends and parents each uniquely contribute to adolescents' happiness and social connectedness, with parent support buffering the effects of low friend support. Similarly, a study investigating the influences of peer groups, family, school, and community on young adolescents found that peer groups and families were the primary influencers in their socialization, while schools and communities played less central roles (Arnon, Shamai, & Ilatov, 2008).

Youth also reported spending time on hobbies or leisure activities (11.4%). Leisure activities have been shown to contribute to adolescents' autonomy by enabling them to socialize independently from their families, develop independence from adults, acquire skills necessary for adulthood, shape their evolving identities, pursue personal interests, and cultivate unique cultural identities within peer groups (Arnon, Shamai, & Ilatov, 2008). This autonomy highlights the importance of socialization agents, such as family members, peers, and mentors, in guiding adolescents through their leisure choices and supporting their identity development.

Camara, Bacigalupe, and Padilla (2017) highlight that adolescents are more likely to seek help from familiar sources such as friends and family when experiencing distress. The factors of familiarity, trust, and approval are crucial in facilitating their disclosure and support-seeking behavior. Enhancing adolescents' relationships within and beyond their families is essential for their well-being. Conversely, a lack of these connections increases the likelihood of negative outcomes (Camara, Bacigalupe, & Padilla, 2017). Therefore, improving youths' connections with supportive adults and community institutions is essential to mitigate risks and foster positive outcomes.

Future research could further explore the extent of adolescents' engagement with these additional settings beyond their home and school environments. Given that non-parental family members were the most frequently reported source of support outside of adolescents' homes and schools, investigating the characteristics of these family relationships that facilitate adolescents' access to such support would be beneficial.

Importance of Faith-Based Settings

The substantial percentage of youth spending time in faith-based settings (13.9%) highlights the crucial role of religious or spiritual communities in providing social support and a

sense of belonging. According to Eccles and Templeton (2002), involvement in faith-based activities enhances adolescents' well-being by fostering positive social relationships and moral development. Similarly, Smith and Denton (2005) suggest that faith-based activities promote a strong sense of community, moral development, and mentorship opportunities. These settings provide structured environments where adolescents can form positive relationships, receive guidance, and develop a sense of purpose and identity.

Faith-based settings are especially beneficial for their unique combination of social, emotional, and moral support, helping adolescents navigate the challenges of urban environments (King & Furrow, 2004; Regnerus, 2003). While other settings like friends' houses and leisure activities are important, the higher frequencies of family members' houses and faith-based settings suggest their distinctive roles in shaping youth experiences and providing essential support in urban areas.

King and Furrow (2004) highlight that youths who are actively involved in religious activities experience stronger intergenerational community connections, often interacting with nonfamilial adults, which provides a robust support network. This social support fosters moral development by integrating adolescents into communities with shared beliefs and values. Effective youth support involves trust, communication, and shared goals within these relationships. Thus, religious participation is linked to positive youth outcomes through the development of social capital.

In summary, while home and school remain primary settings for adolescent activities, findings underscore the diverse array of social contexts that youth navigate. These insights contribute to a broader understanding of how different settings influence adolescents' daily

routines and social experiences, reflecting the multifaceted nature of their social environments (Eccles & Roeser, 2011; Ozer & Weinstein, 2004).

Research Question 3 (RQ3): What types of support are most frequently reported in each setting?

Support at Home

The frequency analysis of participant responses revealed that adolescents predominantly experienced high levels of support within their home environment. Many participants reported receiving substantial support in several key areas of personal development. A majority of adolescents indicated that they were frequently taught to 'do the right thing,' highlighting the role of moral guidance at home. Similarly, a significant number of participants reported receiving strong support in learning the importance of gratitude and recognizing positive aspects of their lives.

Furthermore, a large proportion of adolescents endorsed receiving considerable support in learning to "be kind to others," underscoring the emphasis on developing social and emotional skills within the home. This finding aligns with the broader literature on social-emotional learning, which highlights the critical role of the home environment in nurturing these skills (Durlak et al., 2015). Additionally, many participants reported being shown how to "learn from mistakes," a practice that is crucial for personal growth and resilience, further emphasizing the importance of family guidance in fostering these essential life skills. Notably, a substantial number of participants also shared that they were frequently encouraged not to give up, reflecting the supportive and motivational role of family members.

These findings are supported by research from Kamini (2023), which found that a positive home environment significantly influences adolescents' psychological well-being and academic performance. This study emphasizes the role of family interactions and support in shaping adolescents' development. Similarly, Singh and Saha (2018) demonstrated that a supportive family environment positively impacts adolescents' academic achievements and overall well-being, highlighting the importance of emotional and motivational support within the home.

Support in School Settings

The frequency analysis of participant responses revealed varied levels of perceived support within the school environment. A majority of students reported receiving reassurance that it is okay to need help, with many indicating they received this support often. Additionally, a substantial number of participants reported receiving help solving problems and being taught to do the right thing. Encouragement to work hard and learning to be kind to others were also frequently reported forms of support. These findings indicate that while support levels vary, many students frequently receive essential forms of assistance and guidance within their school environment.

These findings emphasize the importance of school support in adolescent development. According to the CDC (2023), feeling connected to school is critical for promoting students' mental health and preventing negative outcomes such as substance use and violence. School connectedness, defined as students feeling cared for and supported by adults and peers at school, has lasting positive effects on health and well-being, reducing risks related to mental health in adulthood (Centers for Disease Control and Prevention, 2023).

León and colleagues (2021) highlights that school integration (the degree to which students feel accepted, supported, and connected within the school environment) plays a fundamental role in the emotional well-being and psychosocial adjustment of adolescents. Social acceptance within the school setting enhances life satisfaction by boosting self-esteem and self-concept. Additionally, having a solidly built network of support resources is associated with greater psychosocial well-being, reinforcing the critical importance of a supportive school environment.

Despite the recognized importance of school integration, the findings of the current study revealed that schools had the lowest frequency of protective setting attributes among the environments assessed. This is one of the most striking findings of the study, suggesting that many adolescents do not perceive their schools as providing adequate support. This gap in perceived support is concerning given the significant role that schools play in adolescents' daily lives and their potential as protective environments. The low frequency of protective attributes in school settings highlights a critical area for intervention. Schools may need to re-evaluate and strengthen their support systems to ensure that they are meeting the emotional and social needs of their students effectively.

Future research should delve deeper into understanding why schools are perceived as less supportive compared to other settings, such as the home. Investigating the specific factors that contribute to this perception could provide valuable insights into how schools can enhance their support structures. Collaborative efforts among policymakers, community members, and educators are crucial for bridging the gap in support. By banding together, these groups can share their expertise and knowledge, creating holistic strategies that improve school environments.

Such collaboration fosters stronger, more supportive school climates, enhancing students' well-being, academic outcomes, and overall life satisfaction.

Research Question 4 (RQ4): Which domains of PTG are most frequently reported?

The current study revealed that the most frequently reported domain of PTG among adolescents was New Possibilities, reflecting significant changes in how adolescents envision their future and recognize new opportunities. This finding aligns with research by Milam, Ritt-Olson, and Unger (2004), which suggests that traumatic experiences often inspire adolescents to reimagine and restructure their goals and aspirations. Appreciation for Life was another prominent domain, indicating that many adolescents have gained a deeper understanding of what is important to them and have developed a greater appreciation for daily life. Tedeschi and Calhoun (1996) highlighted that a renewed appreciation for life is a common outcome among trauma survivors, supporting the idea that trauma can lead to a heightened awareness of life's everyday moments and priorities.

The domain of Personal Strength also showed notable growth, demonstrating that adolescents feel more capable of handling significant challenges and managing their lives effectively. This increase in resilience and self-efficacy echoes findings by Kilmer et al. (2009), who reported that adolescents often develop greater personal strength following traumatic events. Relating to Others was another key area of growth, with adolescents reporting stronger connections with friends and family and a greater appreciation for the kindness and support of others. Vaughn et al. (2008) emphasized that improved relationships and social connections are significant aspects of PTG, particularly in diverse populations, underscoring the importance of social support and connectedness.

While Spiritual Change was the least reported growth domain, with fewer adolescents feeling a better understanding of spiritual matters or a strengthened faith, a significant number of youth still reported growth in this area. This aligns with research by Wright et al. (2018), who explored spiritual connectedness among low-income urban youth and found that spiritual involvement plays a role in coping and overall adjustment. Although spiritual growth was less frequently reported, it remains a complex and deeply personal aspect of PTG.

Given these findings, future research should delve deeper into the impact of specific stressors, such as community violence and socioeconomic hardships, on PTG among adolescents, particularly in urban settings. This research could also explore how these stressors interact with protective factors like social support and resilience to influence different PTG domains. Additionally, considering that many adolescents spend significant time in faith-based settings outside of their home and school environments, future studies should investigate the role of supportive adults within these contexts on adolescents' spiritual development and their corresponding PTG outcomes. Research in this area would provide valuable insights into how different environments contribute to or hinder PTG, offering guidance for more targeted interventions to support adolescent development in diverse contexts.

Research Question 5 (RQ5): Are particular social support settings associated with particular PTG domains?

Social Support and PTG in Home and School Settings

The current study revealed significant correlations between social support within both home and school settings and all domains of PTG. Specifically, higher scores of home support were significantly associated with PTG domains of Appreciation of Life, New Possibilities,

Personal Strength, Spiritual Change, and Relating to Others. Similarly, higher scores of school support showed positive correlations with all of these PTG domains.

These findings align with Tedeschi and Calhoun's (1996) work, which emphasized the positive legacy of trauma and the role of supportive environments in fostering PTG. The importance of social support in the domain of 'Relating to Others' is also particularly evident in the literature. For instance, Helgeson et al. (2006) reviewed benefit finding and growth research, highlighting that social support enhances interpersonal relationships and emotional connections. Similarly, Malinak et al. (1979) found adults who had recently lost a parent experienced deeper relationships with others. These findings suggest that social support can enhance interpersonal relationships and emotional connections, aligning with the positive correlations observed in the current study.

Prati and Pietrantoni's (2009) meta-analysis highlighted the importance of social support in facilitating PTG, reinforcing the link between home support and growth across multiple domains. This comprehensive analysis found that individuals with strong social support systems, including family and friends, were more likely to experience significant personal growth following trauma.

Zoellner and Maercker (2006) also highlighted how social support systems, including schools, help promote PTG, which supports these findings. These findings suggest that greater support from home and school environments is linked with PTG in various populations, demonstrating the importance of nurturing these support systems to enhance the well-being of adolescents.

Research Question 6 (RQ6): Do relationships among bereavement, social support, and PTG vary as a function of PTG domain?

Home Social Support and PTG Domains

Home social support emerged as a significant predictor across multiple PTG domains for Hypothesis 1. Specifically, higher levels of home social support significantly predicted greater PTG in domains such as Appreciation of Life, New Possibilities, Personal Strength, Spiritual Change, and Relating to Others. These findings are consistent with Kimhi et al., (2009), which demonstrated a positive association between family support and adolescent growth. Familial and social networks play a critical role in fostering growth following adversity across PTG domains. Future research could delve into familial dynamics and relationship quality within these home environments to deepen our understanding of PTG processes.

School Social Support and PTG Domains

Based on the findings for Hypothesis 2, school social support exhibited varied effects across different PTG domains. Specifically, it significantly predicted PTG in domains such as Appreciation of Life, Personal Strength, Spiritual Change, and Relating to Others. This underscores the importance of school environments in fostering growth in various aspects of personal and social development following adversity. However, its relationship with PTG-New Possibilities was not statistically significant, suggesting there may be domain-specific influences.

The lack of a significant relationship between school social support and PTG-New Possibilities may be due to the nature of the support typically provided in school settings. Schools often focus on providing immediate emotional and academic support, which may not directly encourage the exploration of new opportunities or paths in life. Additionally, students might perceive new possibilities as more relevant to settings that offer greater freedom and

individual exploration, such as home or community environments, rather than the structured and curriculum-focused environment of schools. Therefore, the impact of school social support may be more pronounced in domains related to personal growth and social relationships rather than in fostering new life possibilities. This highlights an area for growth for schools: fostering new possibilities by creating environments that encourage exploration and innovation beyond the traditional curriculum.

Faith-Based Settings and PTG

In investigating the impact of faith-based settings on various domains of PTG for Hypothesis 3, several key findings emerged. A significant positive relationship was found between involvement in faith-based social support and the Appreciation of Life PTG domain, though this predictor explained minimal variance and the overall model did not reach significance. Notably, significant correlations were observed between faith-based involvement and other PTG domains, including Spiritual Change and Relating to Others. These findings align with Pargament et al. (1990, 1998), who noted that strengthened religious beliefs can foster a greater sense of control, meaning, and personal growth, particularly in areas closely tied to spiritual and communal experiences.

The particular influence of faith-based social support on domains like Appreciation of Life, Spiritual Change, and Relating to Others can be attributed to the inherent focus of these environments on spiritual teachings, communal support, and moral guidance. Faith-based settings often promote gratitude, deepen one's relationship with a higher power, and foster stronger connections through community and fellowship activities. This environment creates a supportive atmosphere conducive to growth in these specific areas.

Findings also indicated that faith-based settings did not significantly predict PTG in domains such as New Possibilities and Personal Strength, as evidenced by non-significant regression models. According to the meaning-making coping model (Park & Folkman, 1997; Park, Riley, & Snyder, 2012), individuals facing trauma often engage in processes to reconcile the event's meaning with their global beliefs and goals. Discrepancies between the appraised meanings of stressful events and individuals' global meaning systems can significantly impact distress levels and subsequent growth outcomes. The relatively small portions of variance explained by faith-based settings in PTG domains suggest that while these environments may facilitate spiritual growth and social connectedness, other factors—such as individual differences in coping strategies or the specific types of support offered within faith communities—may play crucial roles in determining PTG outcomes in other domains. Additionally, domains like New Possibilities and Personal Strength might require different types of experiences or environments that challenge individuals to envision new opportunities or to develop resilience through overcoming practical challenges. While faith-based settings excel in providing spiritual and communal support, other aspects of growth, such as exploring new possibilities and building personal strength, may also benefit from experiences in varied environments that encourage independence and exposure to diverse life perspectives.

It is also important to emphasize that while faith-based settings had fewer significant findings compared to home and school, this was largely influenced by the smaller sample size of 22 participants. The fact that significant main effects were still observed despite this limitation underscores the special importance of faith-based settings for the fewer youth who take part in them. This suggests that faith-based environments provide unique support and growth

opportunities that are distinct from other settings and are valuable for adolescents engaged in these communities.

Demographic Influences, Bereavement, and PTG

Hypothesis 2 revealed significant insights into the demographic influences and experiences that shape PTG. Identifying as African American/Black emerged as a significant predictor of PTG in the Spiritual Change domain, highlighting cultural factors that contribute to spiritual growth post-adversity. This finding aligns with the positive correlations observed between being African American/Black and both home and school support, suggesting that these environments provide critical resources that foster PTG. Wright and colleagues (2018) found that religiosity and spirituality play a pivotal role in enhancing well-being among African Americans, particularly in low-income urban contexts. Additionally, Whitley (2012) noted that many African Americans regard their connection with God as essential for coping during difficult times. Future research could explore specific religious and spiritual practices common among African American/Black communities that may facilitate PTG, such as prayer, community worship, or engagement in religious rituals.

Moreover, Hypothesis 2 found that bereavement significantly predicted PTG in the Appreciation of Life and Relating to Others domains, indicating its profound impact on these aspects of growth. Bereavement can lead to a deeper appreciation for life and strengthen relationships with others, as individuals often reassess their values and priorities following the loss of a loved one. This finding is consistent with prior research conducted by this author (Platt, 2021), which also observed a significant association between bereavement and posttraumatic growth among urban adolescents.

However, the interaction between social support and bereavement did not significantly influence PTG across the settings and domains studied. For example, the interaction between school social support and bereavement did not significantly influence PTG across the domains studied, suggesting that while school social support is important, its role in mitigating the effects of bereavement may be limited in this context. Interestingly, school support was negatively correlated with being Bi-Racial or Multiracial, highlighting potential gaps in perceived support among these groups and underscoring the need for culturally inclusive support strategies in schools.

Similarly, the interaction between home social support and bereavement did not significantly contribute to the regression models across the PTG domains. These findings suggest that while home social support plays a critical role across all PTG domains, such as Appreciation of Life, New Possibilities, Personal Strength, Spiritual Change, and Relating to Others, the lack of significant interaction effects might be due to several factors. Conceptually, it is possible that the buffering effects of social support in the context of bereavement are not strong enough to create significant changes in PTG outcomes. Methodologically, the limited sample sizes may have reduced the statistical power necessary to detect interaction effects, which are often more subtle and require larger samples to observe. Future research with larger sample sizes may be needed to fully understand these complex interactions.

Additionally, age was a significant predictor, with younger individuals experiencing higher levels of PTG in domains such as Spiritual Change and Relating to Others. This suggests that younger age may facilitate greater growth in certain aspects of personal and social development following trauma. Younger individuals may be more open to growth and change in domains such as spirituality and relationships as they are still in a stage of identity formation and

exploration. These findings also underscore the positive correlation between faith-based support and being Native Hawaiian or Pacific Islander, highlighting the cultural significance of religious and spiritual practices in these communities. Overall, these findings highlight the nuanced roles of demographic factors, bereavement, and support systems in fostering PTG among adolescents.

Limitations and Future Directions

Several limitations should be considered when interpreting the study's outcomes. First, data collection was cross-sectional, which restricts the ability to observe changes in PTG over time or establish causality among variables. Future longitudinal research is needed to track PTG trajectories among urban adolescents and confirm directional effects. Additionally, the reliance on self-report measures introduces potential biases and inaccuracies. Incorporating assessments from multiple sources—such as parents, teachers, peers, and community members—could offer a more comprehensive perspective on growth following trauma and loss. Qualitative methods, including interviews and focus groups, could further enrich understanding by capturing personal experiences of adolescents, providing deeper insights into their perceptions of support and growth. This mixed-methods approach would enable a nuanced exploration of PTG and the role of various support systems across different environments.

Another notable limitation is the disparity in sample sizes across settings, with home and school settings having larger samples ($n = 327$ and $n = 335$, respectively), compared to the much smaller sample in the faith-based setting ($n = 22$). This significant difference in sample sizes likely affected the statistical power, limiting the ability to detect significant associations within the faith-based context. As a result, caution should be exercised when generalizing findings from this setting.

Summary and Implications

This study contributes to a deeper understanding of PTG among a diverse sample of urban adolescents by examining the roles of home and school social support, ethnic identity, age, bereavement, and faith-based settings. The findings emphasize the critical importance of considering familial, cultural, educational, and religious contexts in developing interventions aimed at promoting growth-related outcomes among adolescents facing adversity. Notably, the study highlights the pivotal role of home social support in fostering PTG across multiple domains, indicating that strong familial networks are instrumental in facilitating positive psychological changes following trauma. Additionally, the significant influence of ethnic identity, particularly among African American/Black adolescents, on spiritual growth underscores the need for culturally sensitive approaches in promoting PTG outcomes.

Despite its limitations, this research provides valuable insights into the mechanisms underlying growth-related outcomes among urban adolescents. Future studies could benefit from longitudinal designs to capture the dynamic nature of PTG over time and from qualitative approaches to provide greater depth in understanding growth processes within these contexts. These insights have important implications for educators, counselors, and policymakers who seek to develop effective strategies for supporting young people facing adversity. By advancing our understanding of PTG within urban adolescent populations, this study offers a foundation for interventions that promote positive growth outcomes in diverse urban environments.

Implications for School-Based Support Systems

The finding that home environments were more frequently endorsed as supportive than school environments is particularly noteworthy. This suggests a significant disconnect between

the potential role of schools as supportive environments and adolescents' lived experiences within these settings. While home social support plays a critical role across multiple PTG domains, such as Appreciation of Life, Personal Strength, and Relating to Others, schools often struggle to provide the same level of perceived support. Given that schools are where adolescents spend a substantial portion of their time, it is imperative that these environments are optimized to support their moral, emotional, and social development in ways that complement the support they receive at home. Research suggests that several factors may contribute to adolescents feeling unsupported at school. Schools with high student-to-teacher ratios often struggle to provide individualized attention, affecting students' sense of connection and support (Finn & Achilles, 1999). Educators may also lack training in trauma-informed practices, such as those emphasized by Brunzell et al. (2016), which focus on repairing regulatory abilities, restoring disrupted attachments, and building psychological resources. By addressing these needs, schools can better complement the support received at home and foster an environment that enhances PTG outcomes. Future research could explore how specific school-based interventions might enhance PTG in adolescents facing adversity, considering both cultural and environmental influences. Evidence-based approaches such as positive education, which integrate mental health support and skill-building tailored to students' cultural and environmental contexts, have shown promise (Brunzell et al., 2016). Programs that emphasize present-moment awareness and emotional regulation, alongside peer support groups, can help create a more supportive school climate. Tailoring these interventions can enable schools to foster growth and positive psychological change in adolescents coping with loss and adversity.

Conclusion

In summary, while this study reveals the complex interplay of factors influencing PTG outcomes among urban adolescents, it also highlights the need for targeted interventions across various settings. Programs aiming to enhance moral development should focus on creating deep, trustworthy relationships that include parents, friends, and other adults. By integrating these insights into practice, educators, counselors, and policymakers can better support young people in their journey toward resilience and growth following trauma.

References

Amin, A., Malik, A., Aslam, H. D., & Mahmood, S. (2019). Home environment and academic performance of adolescents: A study from Lahore, Pakistan. *Pakistan Journal of Medical Sciences, 35*(3), 756-760.

Arnon, S., Shamai, S., & Ilatov, Z. (2008). Socialization agents and activities of young adolescents. *Adolescence, 43*(170), 373-397.

Arpawong, T. E., Sussman, S., Milam, J. E., Unger, J. B., Land, H., Sun, P., & Rohrbach, L. A. (2015). Post-traumatic growth, stressful life events, and relationships with substance use behaviors among alternative high school students: A prospective study. *Psychology & Health*, *30*(4), 475–494. doi:10.1080/08870446.2014.979171

Aschenbrenner, J. (1973). Extended families among Black Americans. *Journal of Comparative Family Studies, 4*(3), 257-268.

Balk, D. E. (1999). Bereavement and spiritual change. *Death Studies*, *23*(6), 485–493. doi:10.1080/074811899200849

Bonanno, G. A. (2004). Loss, trauma, and human resilience: Have we underestimated the human capacity to thrive after extremely aversive events?. *American Psychologist, 59*(1), 20–28. doi:10.1037/0003-066x.59.1.20

Brent, D., Melham, N., Donohoe, M. B., & Walker, M. (2009). The incidence and course of depression in bereaved youths 21 months after the loss of a parent to suicide, accident or sudden, natural death. *American Journal of Psychiatry, 166*(7), 786–794. doi:10.1176/appi.ajp.2009.08081244

Breslau, N., Kessler, R. C., Chilcoat, H. D., Schultz, L. R., Davis, G. C., & Andreski, P. (1998). Trauma and posttraumatic stress disorder in the community. *Archives of General Psychiatry, 55*(7), 626. doi:10.1001/archpsyc.55.7.626

Brunzell, T., Stokes, H., & Waters, L. (2016). Trauma-informed positive education: Using positive psychology to strengthen vulnerable students. *Contemporary School Psychology, 20*(1), 63–83. https://doi.org/10.1007/s40688-015-0070-x

Burris, T. (2016). David E. Balk: *Dealing with Dying, Death, and Grief During Adolescence*. *Adolescent Research Review, 1*(3), 175–180. https://doi.org/10.1007/s40894-015-0002-z

Camara, M., Bacigalupe, G., & Padilla, P. (2017). The role of social support in adolescents: are you helping me or stressing me out?. *International Journal of Adolescence and Youth*, *22*(2), 123–136. doi:10.1080/02673843.2013.875480

Centers for Disease Control and Prevention. (2023, February 27). School connectedness: Strategies for increasing protective factors among youth. CDC. https://www.cdc.gov/healthyyouth/protective/school_connectedness.htm

Cherniss, C., & Adler, M. (2000). *Promoting emotional intelligence in organizations.* American Society for Training and Development

Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, *98*(2), 310. Retrieved from http://www.lchc.ucsd.edu/MCA/Mail/xmcamail.2012_11.dir/pdfYukILvXsL0.pdf

Cohen, J. A., & Mannarino, A. P. (2011). Supporting children with traumatic grief: What educators need to know. *School Psychology International, 32*(2), 117–132. https://doi.org/10.1177/0143034311400827

Currier, J. M., Holland, J. M., & Neimeyer, R. A. (2006). Sense-making, grief, and the experience of violent loss: Toward a mediational model. *Death Studies, 30*(5), 403–428. doi:10.1080/07481180600614351

Darling-Hammond, L., Schachner, A., Edgerton, A. K., Badrinarayan, A., Cardichon, J., Cookson Jr., P. W., ... & Griffith, M. (2020). *Restarting and reinventing school: Learning in the time of COVID and beyond.* Learning Policy Institute.

Dorn, E., Hancock, B., Sarakatsannis, J., & Viruleg, E. (2020). *COVID-19 and learning loss—disparities grow and students need help.* McKinsey & Company.

Dressler, W. W. (1979). Disorganization, adaptation, and arterial blood pressure. *Medical Anthropology, 3*(2), 225-248. https://doi.org/10.1080/01459740.1979.9986948

Dressler, W. (1985). Extended family relationships, social support, and mental health in a southern black community. *Journal of Health and Social Behavior, 26*(1), 39-48. https://doi.org/10.2307/2136721

Duffy, S., Grant, K. E., Farrell, S., Barnett, A., Johnson, S., & Tailor, M. (2022). *Development and validation of a measure of protective settings for youth: Places I Spend Time* [Manuscript in preparation].

Durlak, J. A., Domitrovich, C. E., Weissberg, R. P., & Gullotta, T. P. (Eds.). (2015). *Handbook of social and emotional learning: Research and practice.* The Guilford Press.

Eccles, J. S., & Barber, B. L. (1999). Student council, volunteering, basketball, or marching band: What kind of extracurricular involvement matters? *Journal of Adolescent Research, 14*(1), 10-43. https://doi.org/10.1177/0743558499141003

Eccles, J. S., & Templeton, J. (2002). Extracurricular and other after-school activities for youth. *Review of Research in Education, 26*, 113–180. https://doi.org/10.3102/0091732X026001113

Eccles, J. S., & Roeser, R. W. (2011). Schools as developmental contexts during adolescence. *Journal of Research on Adolescence, 21*(1), 225-241. https://doi.org/10.1111/j.1532-7795.2010.00720.x

Eitle, D., D'Alessio, S. J., & Stolzenberg, L. (2006). Economic segregation, race, and homicide. *Social Science Quarterly, 87*(3), 638–657. doi:10.1111/j.1540-6237.2006.00401.x

Elias, M. J., Zins, J. E., Graczyk, P. A., & Weissberg, R. P. (2003). Implementation, sustainability, and scaling up of social-emotional and academic innovations in public schools. *School Psychology Review, 32*(3), 303–319.

Evans, G. W. (2004). The environment of childhood poverty. *American Psychologist, 59*(2), 77–92. https://doi.org/10.1037/0003-066X.59.2.77

Evans, G. W., Li, D., & Whipple, S. S. (2013). Cumulative risk and child development. *Psychological Bulletin, 139*(6), 1342-1396. https://doi.org/10.1037/a0031808

Farrell, A. D., & Bruce, S. E. (1997). Impact of exposure to community violence on violent behavior and emotional distress among urban adolescents. *Journal of Clinical Child Psychology, 26*(1), 2–14. doi:10.1207/s15374424jccp2601_1

Feldman, A. F., & Matjasko, J. L. (2005). The role of school-based extracurricular activities in adolescent development: A comprehensive review and future directions. *Review of Educational Research, 75*(2), 159-210. https://doi.org/10.3102/00346543075002159

Finn, J. D., & Achilles, C. M. (1999). Tennessee's class size study: Findings, implications, misconceptions. *Educational Evaluation and Policy Analysis, 21*(2), 97-109. https://doi.org/10.3102/01623737021002097

Fitzpatrick, K. M., & Boldizar, J. P. (1993). *The prevalence and consequences of exposure to violence among African-American youth*. Journal of Child and Adolescent Psychiatric Nursing, 6(3), 99-106. https://doi.org/10.1111/j.1744-6171.1993.tb00375.x

Furman, W., & Buhrmester, D. (1992). Age and sex differences in perceptions of networks of personal relationships. *Child Development, 63*(1), 103-115. https://doi.org/10.1111/j.1467-8624.1992.tb03599.x

Furstenberg, F. F., Jr., Cook, T. D., Eccles, J., Elder, G. H., Jr., & Sameroff, A. (1999). *Managing to make it: Urban families and adolescent success*. University of Chicago Press.

Gerrish, N., Dyck, M. J., & Marsh, A. (2009). Post-traumatic growth and bereavement. *Mortality*, *14*(3), 226–244. Retrieved from https://www.researchgate.net/profile/Nick-Gerrish/publication/44190471_Posttraumatic_growth_and_bereavement/links/556c2a8808aeccd7773a2a7d/Post-traumatic-growth-and-bereavement.pdf

Gintner, G. G. (2001). Sudden and violent loss: Clinical guidelines for the screening and treatment of survivors. In D. Sandhu (Ed.), *Faces of violence: Psychological correlates, concepts and intervention strategies* (pp. 355-76). New York: Nova Science. *Growing in the aftermath of suffering.* Thousand Oaks, CA: Sage.

Grant, K. E., Carter, J., Marshall, H., O'Donnell, A., DeCator, D., Turek, C., Chen, E., Tseng, K. Y., Rosenkranz, J. A., Dabrowska, J., Achenbach, T., & Adam, E. K. (2022). *A comprehensive, empirically-based stressor classification and measurement system for adolescents: Development and use to predict mental health outcomes* [Manuscript in preparation].

Hawley, P. H. (2014). The social contexts of adolescent friendships: Parents, peers, and the process of socialization. In J. Laursen & W. A. Collins (Eds.), *Relationships in adolescence* (pp. 155-178). John Wiley & Sons.

Helgeson, V. S., Reynolds, K. A., & Tomich, P. L. (2006). A meta-analytic review of benefit finding and growth. *Journal of Consulting and Clinical Psychology, 74*(5), 797-816. https://doi.org/10.1037/0022-006X.74.5.797

Ickovics, J. R., Meade, C. S., Kershaw, T. S., Milan, S., Lewis, J. B., & Ethier, K. A. (2006). Urban teens: Trauma, posttraumatic growth, and emotional distress among female adolescents. *Journal of Consulting and Clinical Psychology, 74*(5), 841–850. doi:10.1037/0022-006x.74.5.841

Janoff-Bulman, R. (1989). Assumptive worlds and the stress of traumatic events: Applications of the schema construct. *Social Cognition, 7*(2), 113–136. doi:10.1521/soco.1989.7.2.113

Johnson, L. M., Torres, C., Sykes, A., Gibson, D. V., & Baker, J. N. (2017). The bereavement experience of adolescents and early young adults with cancer: Peer and parental loss due to death is associated with increased risk of adverse psychological outcomes. *PloS One*, *12*(8), e0181024. doi:10.1371/journal.pone.0181024

Jones, S. M., & Doolittle, E. J. (2017). Social and emotional learning: Introducing the issue. *The Future of Children, 27*(1), 3-11. https://doi.org/10.1353/foc.2017.0000

Kaltman, S., & Bonanno, G. A. (2003). Trauma and bereavement: Examining the impact of sudden and violent deaths. *Journal of Anxiety Disorders, 17*(2), 131–147. doi:10.1016/S0887-6185(02)00184-6

Kamini. (2023). Study of home environment of school going adolescents. *Research Review International Journal of Multidisciplinary, 8*(3), 252–258. https://doi.org/10.31305/rrijm.2023.v08.n03.031

Kaplow, J. B., Saunders, J., Angold, A., & Costello, E. J. (2010). Psychiatric symptoms in bereaved versus non-bereaved youth and young adults: A longitudinal epidemiological study. *Journal of the American Academy of Child & Adolescent Psychiatry, 49*(11), 1145–1154. https://doi.org/10.1016/j.jaac.2010.08.004

Kilmer, R. P., Gil-Rivas, V., Tedeschi, R. G., Cann, A., Calhoun, L. G., & Buchanan, T. (2009). Use of the revised Posttraumatic Growth Inventory for Children. *Journal of Traumatic Stress, 22*(3), 248-253. https://doi.org/10.1002/jts.20410

Kilmer, R. P., Cowen, E. L., Wyman, P. A., Work, W. C., & Magnus, K. B. (2010). Differences in stressors experienced by urban African American, European American, and Hispanic youth. *Journal of Community Psychology, 38*(3), 334-347. https://doi.org/10.1002/jcop.20367

Kim, L. E., Oxley, L., & Asbury, K. (2021). "My brain feels like a browser with 100 tabs open": A longitudinal study of stress, burnout, and psychological distress in teachers during the COVID-19 pandemic. *British Journal of Educational Psychology, 91*(2), 375-395. https://doi.org/10.1111/bjep.12450

Kimhi, S., Eshel, Y., Zysberg, L., & Hantman, S. (2009). Getting a life: Gender differences in postwar recovery. *Sex Roles*, *61*(7-8), 554–565. doi:10.1007/s11199-009-9660-2

King, P. E., & Furrow, J. L. (2004). Religion as a resource for positive youth development: Religion, social capital, and moral outcomes. *Developmental Psychology, 40*(5), 703-713. https://doi.org/10.1037/0012-1649.40.5.703

Kristensen, P., Weisæth, L., & Heir, T. (2012). Bereavement and mental health after sudden and violent losses: A review. *Psychiatry: Interpersonal & Biological Processes*, *75*(1), 76–97. doi:10.1521/psyc.2012.75.1.76

Larson, R. (2000). Toward a psychology of positive youth development. *American Psychologist, 55*(1), 170-183. https://doi.org/10.1037/0003-066X.55.1.170

Laufer, A., & Solomon, Z. (2006). *Posttraumatic growth in Israeli youth exposed to terror incidents: A comparison of religious and secular groups*. Journal of Traumatic Stress, 19(2), 233-244. https://doi.org/10.1002/jts.20092

Laufer, A., & Solomon, Z. (2009). *Religiosity and posttraumatic growth among Israeli youth exposed to terror incidents*. Journal of Religion and Health, 48(3), 271-284. https://doi.org/10.1007/s10943-008-9199-4

LaVeist, T. A. (2005). Disentangling race and socioeconomic status: a key to understanding health inequalities. *Journal of Urban Health*, *82(2_suppl_3),* iii26–iii34. doi:10.1093/jurban/jti061

Lehman, D. R., Wortman, C. B., & Williams, A. F. (1987). Long-term effects of losing a spouse or child in a motor vehicle crash. *Journal of Personality and Social Psychology, 52*(1), 218–231. doi:10.1037/0022-3514.52.1.218

León, J., Inglés, C. J., Granizo, L., & García-Fernández, J. M. (2021). School adjustment in adolescence explained by social support, resilience, and positive affect. *European Journal of Psychology of Education, 36*(3), 743-764.

Leventhal, T., & Brooks-Gunn, J. (2000). The neighborhoods they live in: The effects of neighborhood residence on child and adolescent outcomes. *Psychological Bulletin, 126*(2), 309-337. https://doi.org/10.1037/0033-2909.126.2.309

https://doi.org/10.1007/s10212-020-00503-7

Linley, P. A., & Joseph, S. (2004). Positive change following trauma and adversity: A review. *Journal of Traumatic Stress: Official Publication of The International Society for Traumatic Stress Studies*, *17*(1), 11–21. Retrieved from https://is.muni.cz/el/1423/jaro2011/PSY521/um/linley_joseph_2004_posive_change_after_trauma.pdf

Liu, J., Bolland, J. M., Dick, D., Mustanski, B., & Kertes, D. A. (2015). Effect of environmental risk and externalizing comorbidity on internalizing problems among economically disadvantaged African American youth. *Journal of Research on Adolescence, 26*(3), 552–566. doi:10.1111/jora.12213

Malinak, D. P., Hoyt, M. F., & Patterson, V. (1979). Adults' reactions to the death of a parent: A preliminary study. *The American Journal of Psychiatry, 136*(9), 1152–1156. https://doi.org/10.1176/ajp.136.9.1152

McCart, M. R., Smith, D. W., Saunders, B. E., Kilpatrick, D. G., Resnick, H., & Ruggiero, K. J. (2007). Do urban adolescents become desensitized to community violence? Data from a national survey. *American Journal of Orthopsychiatry*, *77*(3), 434–442. doi:10.1037/0002-9432.77.3.434

McGrath, J. C. (2006). Post-traumatic growth and the origins of early Christianity. *Mental Health, Religion and Culture*, *9*(03), 291–306. doi:10.1080/13694670600615532

McLanahan, S., & Sandefur, G. (1994). *Growing up with a single parent: What hurts, what helps.* Harvard University Press.

Michael, C., & Cooper, M. (2013). Post-traumatic growth following bereavement: A systematic review of the literature. *Counselling Psychology Review*, *28*(4), 18–33. Retrieved from https://www.researchgate.net/profile/Christina-Michael/publication/260244829_Post-traumatic_growth_following_bereavement_A_systematic_review_of_the_literature/links/00b495346ecbb5a1ca000000/Post-traumatic-growth-following-bereavement-A-systematic-review-of-the-literature.pdf

Milam, J. E., Ritt-Olson, A., & Unger, J. B. (2004). Posttraumatic growth among adolescents. *Journal of Adolescent Research, 19*(2), 192–204. doi:10.1177/0743558403258273

Milam, J. E., Ritt-Olson, A., Tan, S., Unger, J. B., & Nezami, E. (2005). *Posttraumatic growth among adolescents*. Journal of Adolescent Research, 20(4), 392–406. https://doi.org/10.1177/0743558405278028

Milner, H. R. (2020). *Start where you are, but don't stay there: Understanding diversity, opportunity gaps, and teaching in today's classrooms* (2nd ed.). Harvard Education Press.

Murphy, S. A., Clark Johnson, L., Wu, L., Fan, J. J., & Lohan, J. (2003). Bereaved parents' outcomes 4 to 60 months after their children's deaths by accident, suicide, or homicide: A comparative study demonstrating differences. *Death Studies*, *27*(1), 39–61. doi:10.1080/07481180302871

O'Rourke, J. J., Tallman, B. A., & Altmaier, E. M. (2008). Measuring post-traumatic changes in spirituality/religiosity. *Mental Health, Religion and Culture*, *11*(7), 719–728. doi:10.1080/13674670801993336

Ozer, E. J., & Weinstein, R. S. (2004). Urban adolescents' exposure to community violence: The role of support, school safety, and social constraints in a school-based sample of boys and girls. *Journal of Clinical Child and Adolescent Psychology, 33*(3), 463-476. https://doi.org/10.1207/s15374424jccp3303_8

Pargament, K. I., Ensing, D. S., Falgout, K., Olsen, H., Reilly, B., Van Haitsma, K., & Warren, R. (1990). God help me: (I) Religious coping efforts as predictors of the outcomes to significant negative life events. *American Journal of Community Psychology, 18*(6), 793-824. https://doi.org/10.1007/BF00938065

Pargament, K. I., Smith, B. W., Koenig, H. G., & Perez, L. (1998). Patterns of positive and negative religious coping with major life stressors. *Journal for the Scientific Study of Religion, 37*(4), 710-724. https://doi.org/10.2307/1388152

Park, C. L., & Folkman, S. (1997). Meaning in the context of stress and coping. *Review of General Psychology, 1*(2), 115–144. https://doi.org/10.1037/1089-2680.1.2.115

Park, C. L., & Helgeson, V. S. (2006). Introduction to the special section: growth following highly stressful life events--current status and future directions. *Journal of Consulting and Clinical Psychology*, *74*(5), 791–796. doi:10.1037/0022-006x.74.5.791

Park, C. L., Riley, K. E., & Snyder, L. B. (2012). Meaning making coping, making sense, and post-traumatic growth following the 9/11 terrorist attacks. *The Journal of Positive Psychology, 7*(3), 198–207. https://doi.org/10.1080/17439760.2012.671347

Pearson, J. E. (1986). The definition and measurement of social support. *Journal of Counseling & Development , 64*(6), 390–395. doi:10.1002/j.1556-6676.1986.tb01144.x

Platt, K. J. (2021). *Life after the storm: An examination of bereavement and posttraumatic growth among urban adolescents* (College of Science and Health Theses and Dissertations, No. 377). DePaul University. https://via.library.depaul.edu/csh_etd/377

Prati, G., & Pietrantoni, L. (2009). Optimism, social support, and coping strategies as factors contributing to posttraumatic growth: A meta-analysis. *Journal of Loss and Trauma, 14*(5), 364–388. doi:10.1080/15325020902724271

Regnerus, M. D. (2003). Religion and positive adolescent outcomes: A review of research and theory. *Review of Religious Research, 44*(4), 394-413. https://doi.org/10.2307/3512217

Reife, I., Duffy, S., & Grant, K. E. (2020). The impact of social support on adolescent coping in the context of urban poverty. *Cultural Diversity & Ethnic Minority Psychology, 26*(2), 200–214. https://doi.org/10.1037/cdp0000296

Ringler, L. L., & Hayden, D. C. (2000). Adolescent bereavement and social support. *Journal of Adolescent Research*, *15*(2), 209–230. doi:10.1177/0743558400152002

Rishel, C. W., Cottrell, L., Cottrell, S., Stanton, B., Gibson, C., & Bougher, K. (2007). Exploring adolescents' relationships with non-parental adults using the Non-Parental Adult Inventory (NPAI). *Child and Adolescent Social Work Journal, 24*(5), 495-508. https://doi.org/10.1007/s10560-007-0098-4

Robin, L., & Omar, H. A. (2014). Adolescent bereavement. *Pediatrics Faculty Publications*, (121). University of Kentucky. https://uknowledge.uky.edu/pediatrics_facpub/121

Santiago, C. D., Wadsworth, M. E., & Stump, J. (2011). Socioeconomic status, neighborhood disadvantage, and poverty-related stress: Prospective effects on psychological syndromes among diverse low-income families. *Journal of Economic Psychology, 32*(2), 218-230. https://doi.org/10.1016/j.joep.2009.10.008

Schacter, H. L., & Margolin, G. (2019). The interplay of friends and parents in adolescents' daily lives: Towards a dynamic view of social support. *Social Development, 28*(3), 708-724. https://doi.org/10.1111/sode.12363

Schuler, E. R., & Boals, A. (2016). Shattering world assumptions: A prospective view of the impact of adverse events on world assumptions. *Psychological Trauma: Theory, Research, Practice, and Policy*, *8*(3), 259–266. doi:10.1037/tra0000073

Shaw, A., Joseph, S., & Linley, P. A. (2005). Religion, spirituality, and posttraumatic growth: A systematic review. *Mental Health, Religion & Culture*, *8*(1), 1–11. doi:10.1080/1367467032000157981

Singh, N., & Saha, R. (2018). Family environment and academic achievement of adolescents in India. *Journal of Child and Family Studies, 27*(11), 3678-3686.

Skiba, R. J., Arredondo, M. I., & Williams, N. T. (2016). More than a metaphor: The contribution of exclusionary discipline to a school-to-prison pipeline. *Equity & Excellence in Education, 49*(1), 77-93. https://doi.org/10.1080/10665684.2015.1112458

Smith, C., & Denton, M. L. (2005). *Soul searching: The religious and spiritual lives of American teenagers*. Oxford University Press.

Smith, S. S. (2014). Traumatic loss in low-income communities of color. *Focus*, *31*(1), 32–34. Retrieved from https://www.irp.wisc.edu/wp/wp-content/uploads/2019/04/foc311j.pdf

Sorensen, L. C., & Ladd, H. F. (2020). The hidden costs of teacher turnover. *AERA Open, 6*(1), 1-24. https://doi.org/10.1177/2332858420905812

Stewart, E. A., & Simons, R. L. (2010). Race, code of the street, and violent delinquency: A multilevel investigation of neighborhood street culture and individual norms of violence. *Criminology*, *48*(2), 569–605. doi:10.1111/j.1745-9125.2010.00196.x

Sveen, C.-A., & Walby, F. A. (2008). Suicide survivors' mental health and grief reactions: A systematic review of controlled studies. *Suicide and Life-Threatening Behavior, 38*(1), 13–29. doi:10.1521/suli.2008.38.1.13

Tedeschi, R. G. (1999). Violence transformed: Posttraumatic growth in survivors and their societies. *Aggression and Violent Behavior*, *4*(3), 319–341. Retrieved from https://ptgi.uncc.edu/wp-content/uploads/sites/9/2015/01/Violence-transformed-Posttraumatic-growth-in-survivors-and-their-societies.pdf

Tedeschi, R. G., & Calhoun, L. G. (1995). *Trauma and transformation: Growing in the aftermath of suffering*. Sage Publications.

Tedeschi, R. G., & Calhoun, L. G. (1996). The Posttraumatic Growth Inventory: Measuring the positive legacy of trauma. *Journal of Traumatic Stress, 9*(3), 455-472. https://doi.org/10.1007/BF02103658

Tedeschi, R. G., & Calhoun, L. G. (2004). Target Article: "Posttraumatic growth: Conceptual foundations and empirical evidence." *Psychological Inquiry, 15*(1), 1–18. doi:10.1207/s15327965pli1501_01

Van Ameringen, M., Mancini, C., Patterson, B., & Boyle, M. H. (2008). Post-traumatic stress disorder in Canada. *CNS Neuroscience & Therapeutics, 14*(3), 171–181. doi:10.1111/j.1755-5949.2008.00049.x

Vaughn, A. A., Roesch, S. C., & Aldridge, A. A. (2009). Stress-related growth in racial/ethnic minority adolescents: Measurement structure and validity. *Educational and Psychological Measurement, 69*(1), 131-145. https://doi.org/10.1177/0013164408322009

Whitley, R. (2012). Religious competence as cultural competence. *Transcultural Psychiatry, 49*(2), 245-260. https://doi.org/10.1177/1363461512439088

Wright, M. O., Yendork, J. S., & Kliewer, W. (2018). Patterns of spiritual connectedness during adolescence among low-income urban youth. *Journal of Adolescence, 62*, 50-60. https://doi.org/10.1016/j.adolescence.2017.11.003

Wolchik, S. A., Coxe, S., Tein, J. Y., Sandler, I. N., & Ayers, T. S. (2009). Six-year longitudinal predictors of posttraumatic growth in parentally bereaved adolescents and young adults. *OMEGA - Journal of Death and Dying, 58*(2), 107–128. doi:10.2190/om.58.2.b

Wortmann, J. H., & Park, C. L. (2008). Religion and spirituality in adjustment following bereavement: An integrative review. *Death Studies, 32*(8), 703–736. doi:10.1080/07481180802289507

Zoellner, T., & Maercker, A. (2006). Posttraumatic growth in clinical psychology—A critical review and introduction of a two component model. *Clinical psychology review*, *26*(5), 626-653. https://doi.org/10.1016/j.cpr.2006.01.008

Appendix

Table A1

Bivariate Correlations Among Key Study Variables

Variable	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1. Home Support																	
2. School Support	.44**																
3. Additional Place	.60**	.24															
4. Faith-Based Support	.03	.08	.22														
5. PTG-Appreciation of Life	.37**	.26**	.32*	.17*													
6. PTG-New Possibilities	.30**	.16**	.08	.07	.80**												
7. PTG-Personal Strength	.37**	.23**	.36*	.13	.81**	.81**											
8. PTG-Spiritual Change	.34**	.21**	.28	.23**	.64**	.65**	.61**										
9. PTG-Relating to Others	.35**	.23**	.24	.17*	.81**	.76**	.76**	.62**									
10. Age	-.14*	-.21*	.06	-.02	-.07	-.11	-.11*	-.17**	-.16**								
11. Gender	.05	-.02	-.03	.03	.01	-.01	-.01	-.03	.02	.03							
12. Hispanic/Latinx	-.04	-.07	.14	.08	-.01	-.02	-.02	-.01	.03	.07	.09						
13. African American/Black	.16**	.15**	-.15	-.09	.06	.08	.04	.23**	.07	-.12*	-.01	-.35**					
14. Asian or Asian American	-.09	.08	-.05	.08	.05	.05	.04	-.09	.06	-.02	-.03	-.24**	-.25**				
15. American Indian/ Alaskan Native	-.09	-.02	-.01	-.03	-.02	-.03	-.03	-.02	.05	.07	.06	.08	-.08	-.04			
16. Native Hawaiian/ Pacific Islander	.02	.06	.12	.20*	.06	.06	.04	.08	.05	-.02	.01	.02	-.05	-.03	-.01		
17. Bi-Racial/Multiracial	-.03	-.12*	.11	-.07	-.01	-.01	.00	.01	-.05	.05	.10	.15**	-.32**	-.15**	-.05	-.03	

Note. Gender variable was dummy coded, 0=Female and 1=Male

* Correlation is significant at the 0.05 level (2-tailed).

** Correlation is significant at the 0.01 level (2-tailed).

Table A2

Paired Samples T-Test Results for Items with the Largest Mean Differences in Perceived Support between Home and School Settings

Pair	**Statement**	**Mean Difference (M)**	**Std. Deviation (SD)**	**Std. Error Mean**	**95% CI Lower**	**95% CI Upper**	**t**	**df**	**One-Sided p**	**Two-Sided p**
Pair 1	Someone helps me when things go wrong	0.38	0.75	0.04	0.30	0.46	9.68	367	<.001	<.001
Pair 2	Someone helps me to not give up	0.34	0.84	0.04	0.26	0.43	7.80	366	<.001	<.001
Pair 3	I get help with things I am afraid or ashamed of	0.36	0.80	0.04	0.28	0.44	8.65	364	<.001	<.001
Pair 4	I learn what to do with something I can't change	0.28	0.75	0.04	0.20	0.36	7.20	367	<.001	<.001
Pair 5	I get help solving a problem	0.04	0.82	0.04	-0.04	0.13	0.96	365	0.17	0.34
Pair 6	Someone helps me practice something I am learning	-0.06	0.86	0.05	-0.15	0.03	-1.33	365	0.09	0.18
Pair 7	Someone models being kind to others	0.19	0.84	0.04	0.10	0.28	4.27	365	<.001	<.001
Pair 8	Someone teaches me how to work hard	0.23	0.76	0.04	0.15	0.31	5.78	363	<.001	<.001
Pair 9	Someone shows me that everyone is valuable	0.33	0.83	0.04	0.24	0.41	7.51	364	<.001	<.001
Pair 10	I learn to be kind to others	0.30	0.73	0.04	0.23	0.38	7.93	365	<.001	<.001

Pair 11	Someone tells me I don't have to be perfect	0.37	0.85	0.04	0.29	0.46	8.39	366	<.001	<.001
Pair 12	Someone shows me how to learn from mistakes	0.34	0.83	0.04	0.26	0.43	7.92	365	<.001	<.001
Pair 13	Someone tells me it is okay to fail	0.12	0.83	0.04	0.04	0.21	2.76	363	0.00	0.01
Pair 14	Someone tells me everyone can get smarter	0.20	0.81	0.04	0.12	0.29	4.82	366	<.001	<.001
Pair 15	I learn that I am more than what others think of me	0.32	0.79	0.04	0.23	0.40	7.57	353	<.001	<.001
Pair 16	I learn that I am more than what I look like	0.32	0.76	0.04	0.25	0.40	8.17	365	<.001	<.001
Pair 17	I learn that everyone should make the world better	0.17	0.72	0.04	0.10	0.25	4.50	363	<.001	<.001
Pair 18	I learn that every person can change for the better	0.22	0.77	0.04	0.14	0.30	5.55	366	<.001	<.001
Pair 19	I learn to notice the good things and be grateful	0.34	0.77	0.04	0.26	0.42	8.41	362	<.001	<.001
Pair 20	Someone shows me that good can come from bad	0.18	0.82	0.04	0.10	0.26	4.18	368	<.001	<.001
Pair 21	I learn to show up and stick with things	0.19	0.74	0.04	0.12	0.27	4.94	364	<.001	<.001

Pair 22	Someone shows me that I am valuable	0.34	0.78	0.04	0.26	0.42	8.41	364	<.001	<.001
Pair 23	Someone tells me that it is okay to need help	0.16	0.73	0.04	0.09	0.24	4.21	368	<.001	<.001
Pair 24	I learn that we can do more together than apart	0.18	0.77	0.04	0.10	0.26	4.51	363	<.001	<.001
Pair 25	Someone knows what is going on with me	0.29	0.82	0.04	0.21	0.38	6.87	366	<.001	<.001
Pair 26	Someone gives me good advice	0.23	0.76	0.04	0.15	0.31	5.78	364	<.001	<.001
Pair 27	I have good role models	0.30	0.73	0.04	0.23	0.38	7.93	364	<.001	<.001
Pair 28	Someone teaches me how to make sense of the world	0.22	0.85	0.05	0.14	0.31	5.01	362	<.001	<.001
Pair 29	Someone helps me develop a faith or philosophy	0.43	0.85	0.05	0.34	0.51	9.51	363	<.001	<.001
Pair 30	Someone teaches me to do the right thing	0.33	0.68	0.04	0.26	0.41	9.31	361	<.001	<.001

Note: This table displays the paired sample t-test results including mean differences, standard deviations, t-values, degrees of freedom, and significance levels for 30 different pairs of statements.

Table A3

Regression Analysis for Predicting Post Traumatic Growth-Appreciation of Life: The Role of Home Support (Hypothesis 1)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.40	0.13
	Bereavement	0.23	0.11	0.12	2.11	0.04		
	Home Support	0.05	0.01	0.35	6.09	<.001		
	Age	-0.05	0.06	-0.05	-0.86	0.39		
	Gender	0.06	0.22	0.02	0.25	0.80		
	Hispanic/Latinx	0.08	0.25	0.02	0.32	0.75		
	African American/Black	0.17	0.29	0.04	0.59	0.56		
	Asian/Asian American	0.24	0.39	0.04	0.63	0.53		
	American Indian/Alaskan Native	0.12	1.04	0.01	0.12	0.91		
	Native Hawaiian/Pacific Islander	1.13	1.25	0.05	0.91	0.37		
	Bi-racial/multiracial	0.10	0.31	0.02	0.33	0.74		
Model 2							0.41	0.13
	Bereavement	-0.22	0.40	-0.11	-0.53	0.60		
	Home Support	0.05	0.01	0.37	6.20	<.001		
	Age	-0.05	0.06	-0.05	-0.87	0.39		
	Gender	0.08	0.22	0.02	0.35	0.73		
	Hispanic/Latinx	0.08	0.25	0.02	0.32	0.75		
	African American/Black	0.17	0.29	0.04	0.59	0.55		
	Asian/Asian American	0.24	0.38	0.04	0.63	0.53		
	American Indian/Alaskan Native	0.42	1.07	0.02	0.40	0.69		
	Native Hawaiian/Pacific Islander	1.13	1.25	0.05	0.91	0.37		
	Bi-racial/multiracial	0.09	0.31	0.02	0.27	0.79		
	HomeSupportxBereavement	0.01	0.01	0.24	1.15	0.25		

Note: Dependent Variable: Post Traumatic Growth Appreciation of Life Score - T1

Table A4

Regression Analysis for Predicting Post Traumatic Growth-New Possibilities: The Role of Home Support (Hypothesis 1)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.34	0.08
	Bereavement	0.18	0.12	0.09	1.51	0.13		
	Home Support	0.04	0.01	0.28	4.70	<.001		
	Age	-0.10	0.06	-0.09	-1.56	0.12		
	Gender	-0.01	0.24	-0.00	-0.03	0.98		
	Hispanic/Latinx	0.17	0.28	0.04	0.62	0.54		
	African American/Black	0.37	0.32	0.09	1.18	0.24		
	Asian/Asian American	0.44	0.42	0.07	1.04	0.30		
	American Indian/Alaskan Native	0.03	1.14	0.00	0.02	0.98		
	Native Hawaiian/Pacific Islander	1.37	1.38	0.06	0.99	0.32		
	Bi-racial/multiracial	0.06	0.34	0.01	0.16	0.87		
Model 2							0.35	0.09
	Bereavement	-0.30	0.45	-0.15	-0.67	0.50		
	Home Support	0.04	0.01	0.29	4.83	<.001		
	Age	-0.10	0.06	-0.09	-1.57	0.12		
	Gender	0.02	0.24	0.00	0.06	0.95		
	Hispanic/Latinx	0.17	0.28	0.04	0.62	0.54		
	African American/Black	0.38	0.32	0.09	1.19	0.24		
	Asian/Asian American	0.44	0.42	0.07	1.04	0.30		
	American Indian/Alaskan Native	0.35	1.18	0.02	0.30	0.76		
	Native Hawaiian/Pacific Islander	1.37	1.38	0.06	0.99	0.32		
	Bi-racial/multiracial	0.04	0.34	0.01	0.11	0.91		
	HomeSupportxBereavement	0.01	0.01	0.24	1.12	0.26		

Note: Dependent Variable: Post Traumatic Growth New Possibilities Score - T1

Table A5

Regression Analysis for Predicting Post Traumatic Growth-Personal Strength: The Role of Home Support (Hypothesis 1)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.40	0.13
	Bereavement	0.20	0.11	0.10	1.75	0.08		
	Home Support	0.05	0.01	0.35	6.02	<.001		
	Age	-0.11	0.06	-0.11	-1.88	0.06		
	Gender	-0.01	0.22	0.00	-0.05	0.96		
	Hispanic/Latinx	-0.04	0.25	-0.01	-0.17	0.87		
	African American/Black	0.12	0.29	0.03	0.40	0.69		
	Asian/Asian American	0.21	0.39	0.03	0.52	0.60		
	American Indian/Alaskan Native	0.02	1.05	0.00	0.02	0.98		
	Native Hawaiian/Pacific Islander	0.70	1.27	0.03	0.55	0.58		
	Bi-racial/multiracial	0.12	0.32	0.02	0.37	0.71		
Model 2							0.41	0.13
	Bereavement	-0.19	0.41	-0.10	-0.47	0.64		
	Home Support	0.05	0.01	0.36	6.10	<.001		
	Age	-0.11	0.06	-0.11	-1.89	0.06		
	Gender	0.01	0.22	0.00	0.03	0.98		
	Hispanic/Latinx	-0.04	0.25	-0.01	-0.15	0.88		
	African American/Black	0.12	0.29	0.03	0.41	0.68		
	Asian/Asian American	0.21	0.39	0.03	0.52	0.60		
	American Indian/Alaskan Native	0.28	1.09	0.02	0.26	0.79		
	Native Hawaiian/Pacific Islander	0.70	1.27	0.03	0.55	0.58		
	Bi-racial/multiracial	0.10	0.32	0.02	0.32	0.75		
	HomeSupportxBereavement	0.01	0.01	0.21	0.98	0.33		

Note: Dependent Variable: Post Traumatic Growth Personal Strength Score - T1

Table A6

Regression Analysis for Predicting Post Traumatic Growth-Spiritual Change: The Role of Home Support (Hypothesis 1)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.44	0.16
	Bereavement	0.15	0.14	0.07	1.13	0.26		
	Home Support	0.05	0.01	0.29	5.04	<.001		
	Age	-0.16	0.07	-0.13	-2.27	0.02		
	Gender	-0.18	0.27	-0.04	-0.66	0.51		
	Hispanic/Latinx	0.38	0.31	0.08	1.23	0.22		
	African American/Black	1.20	0.35	0.23	3.41	<.001		
	Asian/Asian American	-0.15	0.47	-0.02	-0.33	0.74		
	American Indian/Alaskan Native	0.63	0.28	0.03	0.49	0.62		
	Native Hawaiian/Pacific Islander	2.38	0.54	0.09	1.54	0.12		
	Bi-racial/multiracial	0.61	0.38	0.10	1.58	0.12		
Model 2							0.45	0.17
	Bereavement	-0.40	0.50	-0.17	-0.79	0.43		
	Home Support	0.05	0.01	0.30	5.17	<.001		
	Age	-0.17	0.07	-0.13	-2.29	0.02		
	Gender	-0.15	0.27	-0.03	-0.57	0.57		
	Hispanic/Latinx	0.38	0.31	0.08	1.24	0.22		
	African American/Black	1.21	0.35	0.23	3.42	<.001		
	Asian/Asian American	-0.16	0.47	-0.02	-0.33	0.74		
	American Indian/Alaskan Native	1.00	1.32	0.05	0.76	0.45		
	Native Hawaiian/Pacific Islander	2.38	1.54	0.09	1.54	0.13		
	Bi-racial/multiracial	0.59	0.38	0.09	1.53	0.13		
	HomeSupportxBereavement	0.01	0.01	0.24	1.14	0.25		

Note: Dependent Variable: Post Traumatic Growth Spiritual Change Score - T1

Table A7

Regression Analysis for Predicting Post Traumatic Growth-Relating to Others: The Role of Home Support (Hypothesis 1)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.42	0.14
	Bereavement	0.27	0.11	0.14	2.42	0.02		
	Home Support	0.04	0.01	0.32	5.62	<.001		
	Age	-0.15	0.06	-0.14	-2.53	0.01		
	Gender	0.18	0.22	0.05	0.81	0.42		
	Hispanic/Latinx	0.29	0.25	0.07	1.13	0.26		
	African American/Black	0.24	0.29	0.06	0.82	0.41		
	Asian/Asian American	0.53	0.39	0.09	1.35	0.18		
	American Indian/Alaskan Native	1.31	0.93	0.08	1.41	0.16		
	Native Hawaiian/Pacific Islander	0.94	1.28	0.04	0.73	0.46		
	Bi-racial/multiracial	-0.02	0.32	-0.01	-0.08	0.94		
Model 2							0.42	0.14
	Bereavement	0.02	0.41	0.01	0.04	0.97		
	Home Support	0.05	0.01	0.33	5.63	<.001		
	Age	-0.15	0.06	-0.14	-2.54	0.01		
	Gender	0.19	0.22	0.05	0.86	0.39		
	Hispanic/Latinx	0.29	0.25	0.07	1.13	0.26		
	African American/Black	0.24	0.29	0.06	0.82	0.41		
	Asian/Asian American	0.53	0.39	0.09	1.35	0.18		
	American Indian/Alaskan Native	1.47	0.96	0.09	1.52	0.13		
	Native Hawaiian/Pacific Islander	0.94	1.28	0.04	0.73	0.46		
	Bi-racial/multiracial	-0.03	0.32	-0.01	-0.10	0.92		
	HomeSupportxBereavement	0.01	0.01	0.14	0.64	0.52		

Note: Dependent Variable: Post Traumatic Growth Relating to Others Score - T1

Table A8

Regression Analysis for Predicting Post Traumatic Growth-Appreciation of Life: The Role of School Support (Hypothesis 2)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.30	0.06
	Bereavement	0.25	0.11	0.13	2.15	0.03		
	School Support	0.03	0.01	0.25	4.08	<.001		
	Age	-0.02	0.06	-0.02	-0.30	0.76		
	Gender	0.20	0.23	0.05	0.89	0.38		
	Hispanic/Latinx	0.11	0.26	0.03	0.43	0.67		
	African American/Black	0.27	0.30	0.06	0.89	0.37		
	Asian/Asian American	0.24	0.39	0.04	0.61	0.54		
	American Indian/Alaskan Native	-0.21	1.10	-0.01	-0.19	0.85		
	Native Hawaiian/Pacific Islander	1.03	1.33	0.05	0.77	0.44		
	Bi-racial/multiracial	0.23	0.34	0.05	0.70	0.49		
Model 2							0.30	0.06
	Bereavement	0.34	0.30	0.17	1.11	0.27		
	School Support	0.03	0.01	0.25	4.06	<.001		
	Age	-0.02	0.06	-0.02	-0.29	0.77		
	Gender	0.21	0.23	0.05	0.90	0.37		
	Hispanic/Latinx	0.11	0.26	0.03	0.43	0.67		
	African American/Black	0.26	0.30	0.06	0.86	0.39		
	Asian/Asian American	0.22	0.39	0.04	0.57	0.57		
	American Indian/Alaskan Native	-0.28	1.12	-0.02	-0.25	0.80		
	Native Hawaiian/Pacific Islander	1.02	1.34	0.05	0.77	0.44		
	Bi-racial/multiracial	0.22	0.34	0.04	0.64	0.52		
	SchoolSupportxBereavement	0.00	0.01	-0.05	-0.32	0.75		

Note: Dependent Variable: Post Traumatic Growth Appreciation of Life Score - T1

Table A9

Regression Analysis for Predicting Post Traumatic Growth-New Possibilities: The Role of School Support (Hypothesis 2)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.23	0.02
	Bereavement	0.18	0.12	0.09	1.50	0.14		
	School Support	0.02	0.01	0.13	2.09	0.04		
	Age	-0.08	0.07	-0.07	-1.17	0.24		
	Gender	0.06	0.25	0.02	0.25	0.80		
	Hispanic/Latinx	0.29	0.28	0.07	1.03	0.30		
	African American/Black	0.42	0.32	0.10	1.31	0.19		
	Asian/Asian American	0.40	0.42	0.07	0.96	0.34		
	American Indian/Alaskan Native	-0.38	1.17	-0.02	-0.32	0.75		
	Native Hawaiian/Pacific Islander	1.33	1.42	0.06	0.93	0.35		
	Bi-racial/multiracial	0.27	0.36	0.05	0.74	0.46		
Model 2							0.23	0.01
	Bereavement	0.01	0.32	0.01	0.04	0.97		
	School Support	0.02	0.01	0.13	2.09	0.04		
	Age	-0.08	0.07	-0.07	-1.19	0.24		
	Gender	0.05	0.25	0.01	0.22	0.83		
	Hispanic/Latinx	0.29	0.28	0.07	1.01	0.31		
	African American/Black	0.43	0.32	0.10	1.33	0.18		
	Asian/Asian American	0.42	0.417	0.07	1.01	0.31		
	American Indian/Alaskan Native	-0.25	1.20	-0.01	-0.21	0.84		
	Native Hawaiian/Pacific Islander	1.33	1.42	0.06	0.94	0.35		
	Bi-racial/multiracial	0.29	0.36	0.05	0.81	0.42		
	SchoolSupportxBereavement	0.01	0.01	0.09	0.58	0.56		

Note: Dependent Variable: Post Traumatic Growth New Possibilities Score - T1

Table A10

Regression Analysis for Predicting Post Traumatic Growth-Personal Strength: The Role of School Support (Hypothesis 2)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.26	0.03
	Bereavement	0.20	0.12	0.10	1.73	0.09		
	School Support	0.03	0.01	0.20	3.32	0.00		
	Age	-0.08	0.06	-0.08	-1.25	0.21		
	Gender	0.10	0.23	0.03	0.41	0.69		
	Hispanic/Latinx	0.02	0.27	0.01	0.09	0.93		
	African American/Black	0.13	0.30	0.03	0.44	0.66		
	Asian/Asian American	0.18	0.40	0.03	0.46	0.64		
	American Indian/Alaskan Native	-0.40	1.12	-0.02	-0.36	0.72		
	Native Hawaiian/Pacific Islander	0.61	1.35	0.03	0.45	0.65		
	Bi-racial/multiracial	0.15	0.34	0.03	0.43	0.67		
Model 2							0.26	0.03
	Bereavement	0.32	0.30	0.17	1.07	0.29		
	School Support	0.03	0.01	0.20	3.31	0.00		
	Age	-0.08	0.06	-0.08	-1.23	0.22		
	Gender	0.10	0.23	0.03	0.43	0.67		
	Hispanic/Latinx	0.03	0.27	0.01	0.10	0.92		
	African American/Black	0.13	0.30	0.03	0.41	0.68		
	Asian/Asian American	0.17	0.40	0.03	0.42	0.68		
	American Indian/Alaskan Native	-0.49	1.14	-0.03	-0.43	0.67		
	Native Hawaiian/Pacific Islander	0.61	1.36	0.03	0.45	0.66		
	Bi-racial/multiracial	0.13	0.35	0.03	0.37	0.71		
	SchoolSupportxBereavement	0.00	0.01	-0.07	-0.44	0.66		

Note: Dependent Variable: Post Traumatic Growth Personal Strength Score - T1

Table A11

Regression Analysis for Predicting Post Traumatic Growth- Spiritual Change: The Role of School Support (Hypothesis 2)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.37	0.10
	Bereavement	0.19	0.14	0.08	1.41	0.16		
	School Support	0.03	0.10	0.17	2.91	0.00		
	Age	-0.14	0.07	-0.11	-1.85	0.07		
	Gender	-0.03	0.28	-0.01	-0.12	0.90		
	Hispanic/Latinx	0.47	0.32	0.10	1.49	0.14		
	African American/Black	1.33	0.36	0.26	3.69	<.001		
	Asian/Asian American	-0.10	0.47	-0.01	-0.20	0.84		
	American Indian/Alaskan Native	0.15	1.33	0.01	0.11	0.91		
	Native Hawaiian/Pacific Islander	2.24	1.62	0.08	1.39	0.17		
	Bi-racial/multiracial	0.66	0.41	0.10	1.62	0.11		
Model 2							0.37	0.10
	Bereavement	0.15	0.36	0.06	0.43	0.67		
	School Support	0.03	0.01	0.17	2.91	0.00		
	Age	-0.14	0.07	-0.11	-1.85	0.07		
	Gender	-0.04	0.28	-0.01	-0.13	0.90		
	Hispanic/Latinx	0.47	0.32	0.10	1.49	0.14		
	African American/Black	1.33	0.36	0.26	3.69	<.001		
	Asian/Asian American	-0.09	0.47	-0.01	-0.19	0.85		
	American Indian/Alaskan Native	0.18	1.36	0.01	0.13	0.90		
	Native Hawaiian/Pacific Islander	2.24	1.62	0.08	1.39	0.17		
	Bi-racial/multiracial	0.67	0.41	0.10	1.62	0.11		
	SchoolSupportxBereavement	0.00	0.01	0.02	0.13	0.90		

Note: Dependent Variable: Post Traumatic Growth Spiritual Change Score - T1

Table A12

Regression Analysis for Predicting Post Traumatic Growth- Relating to Others: The Role of School Support (Hypothesis 2)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.34	0.08
	Bereavement	0.34	0.11	0.18	2.99	0.00		
	School Support	0.03	0.01	0.19	3.21	0.00		
	Age	-0.12	0.06	-0.12	-1.95	0.05		
	Gender	0.31	0.23	0.08	1.36	0.18		
	Hispanic/Latinx	0.31	0.26	0.08	1.16	0.25		
	African American/Black	0.38	0.30	0.09	1.26	0.21		
	Asian/Asian American	0.44	0.39	0.08	1.14	0.26		
	American Indian/Alaskan Native	0.71	0.97	0.04	0.73	0.46		
	Native Hawaiian/Pacific Islander	0.84	1.34	0.04	0.63	0.53		
	Bi-racial/multiracial	0.08	0.34	0.02	0.23	0.82		
Model 2							0.34	0.08
	Bereavement	0.27	0.30	0.14	0.92	0.36		
	School Support	0.03	0.01	0.19	3.20	0.00		
	Age	-0.12	0.06	-0.12	-1.96	0.05		
	Gender	0.31	0.23	0.08	1.34	0.18		
	Hispanic/Latinx	0.31	0.27	0.08	1.15	0.25		
	African American/Black	0.39	0.30	0.09	1.27	0.20		
	Asian/Asian American	0.45	0.39	0.08	1.15	0.25		
	American Indian/Alaskan Native	0.74	0.98	0.05	0.76	0.45		
	Native Hawaiian/Pacific Islander	0.84	1.34	0.04	0.63	0.53		
	Bi-racial/multiracial	0.09	0.34	0.02	0.26	0.79		
	SchoolSupportxBereavement	0.00	0.01	0.04	0.26	0.79		

Note: Dependent Variable: Post Traumatic Growth Relating to Others Score - T1

Table A13

Regression Analysis for Predicting Post Traumatic Growth- Appreciation of Life: The Role of Faith-Based Support (Hypothesis 3)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.26	0.00
	Bereavement	0.23	0.16	0.12	1.43	0.16		
	Faith-Based Support	0.31	0.15	0.18	2.03	0.05		
	Age	0.04	0.09	0.04	0.50	0.62		
	Gender	0.23	0.34	0.06	0.68	0.50		
	Hispanic/Latinx	0.46	0.40	0.12	1.15	0.25		
	African American/Black	-0.04	0.43	-0.01	-0.09	0.93		
	Asian/Asian American	0.16	0.57	0.03	0.29	0.78		
	American Indian/Alaskan Native	0.71	0.97	0.04	0.73	0.46		
	Native Hawaiian/Pacific Islander	-0.84	1.96	-0.04	-0.43	0.67		
	Bi-racial/multiracial	0.03	0.50	0.01	0.07	0.95		
Model 2							0.26	-0.01
	Bereavement	0.21	0.18	0.12	1.18	0.24		
	Faith-Based Setting	0.31	0.15	0.18	2.02	0.05		
	Age	0.04	0.09	0.04	0.47	0.64		
	Gender	0.23	0.34	0.06	0.67	0.51		
	Hispanic/Latinx	0.48	0.41	0.12	1.16	0.25		
	African American/Black	-0.04	0.43	-0.01	-0.09	0.93		
	Asian/Asian American	0.17	0.58	0.03	0.30	0.77		
	American Indian/Alaskan Native	0.74	0.98	0.05	0.76	0.45		
	Native Hawaiian/Pacific Islander	-0.86	1.97	-0.04	-0.44	0.66		
	Bi-racial/multiracial	0.04	0.50	0.01	0.07	0.94		
	FaithBasedxBereavement	0.03	0.14	0.02	0.20	0.84		

Note: Dependent Variable: Post Traumatic Growth Appreciation of Life Score - T1

Table A14

Regression Analysis for Predicting Post Traumatic Growth- New Possibilities: The Role of Faith-Based Support (Hypothesis 3)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.20	-0.03
	Bereavement	0.13	0.17	0.07	0.77	0.44		
	Faith-Based Support	0.12	0.16	0.07	0.75	0.45		
	Age	0.04	0.10	0.03	0.37	0.72		
	Gender	0.42	0.36	0.11	1.19	0.24		
	Hispanic/Latinx	0.57	0.43	0.14	1.34	0.18		
	African American/Black	0.07	0.46	0.02	0.16	0.87		
	Asian/Asian American	0.21	0.61	0.04	0.34	0.73		
	American Indian/Alaskan Native	0.71	0.97	0.04	0.73	0.46		
	Native Hawaiian/Pacific Islander	-0.40	2.09	-0.02	-0.19	0.85		
	Bi-racial/multiracial	-0.03	0.53	-0.01	-0.05	0.96		
Model 2							0.23	-0.02
	Bereavement	0.03	0.19	0.02	0.15	0.88		
	Faith-Based Setting	0.13	0.16	0.07	0.77	0.44		
	Age	0.02	0.10	0.02	0.22	0.83		
	Gender	0.40	0.36	0.10	1.12	0.27		
	Hispanic/Latinx	0.67	0.44	0.16	1.54	0.13		
	African American/Black	0.09	0.46	0.02	0.19	0.85		
	Asian/Asian American	0.25	0.61	0.04	0.41	0.68		
	American Indian/Alaskan Native	0.74	0.98	0.05	0.76	0.45		
	Native Hawaiian/Pacific Islander	-0.54	2.09	-0.02	-0.26	0.80		
	Bi-racial/multiracial	-0.01	0.53	0.00	-0.02	0.99		
	FaithBasedxBereavement	0.18	0.15	0.12	1.21	0.23		

Note: Dependent Variable: Post Traumatic Growth New Possibilities Score - T1

Table A15

Regression Analysis for Predicting Post Traumatic Growth- Personal Strength: The Role of Faith-Based Support (Hypothesis 3)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.23	-0.01
	Bereavement	0.11	0.17	0.06	0.64	0.52		
	Faith-Based Support	0.25	0.16	0.14	1.58	0.12		
	Age	0.03	0.09	0.03	0.35	0.727		
	Gender	0.32	0.35	0.08	0.91	0.36		
	Hispanic/Latinx	0.42	0.42	0.11	1.01	0.31		
	African American/Black	-0.11	0.44	-0.03	-0.25	0.80		
	Asian/Asian American	0.49	0.59	0.09	0.83	0.41		
	American Indian/Alaskan Native	0.71	0.97	0.04	0.73	0.46		
	Native Hawaiian/Pacific Islander	-1.62	2.02	-0.07	-0.80	0.42		
	Bi-racial/multiracial	0.13	0.51	0.03	0.25	0.80		
Model 2							0.23	-0.02
	Bereavement	0.09	0.19	0.05	0.50	0.62		
	Faith-Based Setting	0.25	0.16	0.14	1.58	0.12		
	Age	0.03	0.09	0.03	0.33	0.74		
	Gender	0.31	0.35	0.08	0.90	0.37		
	Hispanic/Latinx	0.43	0.42	0.11	1.02	0.31		
	African American/Black	-0.11	0.44	-0.03	-0.25	0.80		
	Asian/Asian American	0.49	0.59	0.09	0.84	0.41		
	American Indian/Alaskan Native	0.74	0.98	0.05	0.76	0.45		
	Native Hawaiian/Pacific Islander	-1.64	2.03	-0.07	-0.81	0.42		
	Bi-racial/multiracial	0.13	0.51	0.03	0.26	0.80		
	FaithBasedxBereavement	0.02	0.15	0.02	0.16	0.87		

Note: Dependent Variable: Post Traumatic Growth Personal Strength Score - T1

Table A16

Regression Analysis for Predicting Post Traumatic Growth- Spiritual Change: The Role of Faith-Based Support (Hypothesis 3)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.32	0.04
	Bereavement	0.08	0.19	0.04	0.43	0.67		
	Faith-Based Support	0.52	0.18	0.25	2.84	0.01		
	Age	-0.09	0.11	-0.07	-0.84	0.41		
	Gender	0.10	0.40	0.02	0.24	0.81		
	Hispanic/Latinx	0.32	0.48	0.07	0.66	0.51		
	African American/Black	1.00	0.51	0.21	1.96	0.05		
	Asian/Asian American	-0.03	0.68	0.00	-0.04	0.97		
	American Indian/Alaskan Native	0.71	0.97	0.04	0.73	0.46		
	Native Hawaiian/Pacific Islander	0.06	2.34	0.00	0.03	0.98		
	Bi-racial/multiracial	0.33	0.59	0.05	0.56	0.58		
Model 2							0.32	0.03
	Bereavement	0.03	0.22	0.01	0.15	0.88		
	Faith-Based Setting	0.52	0.18	0.25	2.84	0.01		
	Age	-0.10	0.11	-0.01	-0.89	0.38		
	Gender	0.08	0.40	0.02	0.21	0.84		
	Hispanic/Latinx	0.37	0.49	0.08	1.02	0.31		
	African American/Black	1.01	0.51	0.21	1.97	0.05		
	Asian/Asian American	-0.01	0.68	0.00	-0.01	0.99		
	American Indian/Alaskan Native	0.74	0.98	0.05	0.76	0.45		
	Native Hawaiian/Pacific Islander	-0.01	2.35	0.00	0.00	1.00		
	Bi-racial/multiracial	0.34	0.59	0.06	0.58	0.57		
	FaithBasedxBereavement	0.09	0.17	0.05	0.53	0.60		

Note: Dependent Variable: Post Traumatic Growth Spiritual Change Score - T1

Table A17

Regression Analysis for Predicting Post Traumatic Growth- Relating to Others: The Role of Faith-Based Support (Hypothesis 3)

Model	Variable	B	SE B	β	t	p	R	Adjusted R^2
Model 1							0.30	0.02
	Bereavement	0.30	0.16	0.16	1.88	0.06		
	Faith-Based Support	0.33	0.15	0.19	2.15	0.03		
	Age	-0.09	0.09	-0.09	-0.99	0.32		
	Gender	0.43	0.33	0.12	1.31	0.19		
	Hispanic/Latinx	0.42	0.40	0.11	1.05	0.29		
	African American/Black	0.08	0.43	0.02	0.18	0.86		
	Asian/Asian American	0.14	0.56	0.03	0.25	0.80		
	American Indian/Alaskan Native	-0.03	1.90	0.00	-0.01	0.99		
	Native Hawaiian/Pacific Islander	-1.79	1.93	-0.08	-0.93	0.35		
	Bi-racial/multiracial	-0.22	0.49	-0.04	-0.45	0.66		
Model 2							0.30	0.01
	Bereavement	0.28	0.18	0.15	1.56	0.12		
	Faith-Based Setting	0.33	0.15	0.19	2.15	0.03		
	Age	-0.09	0.09	-0.09	-1.01	0.31		
	Gender	0.43	0.33	0.11	1.29	0.20		
	Hispanic/Latinx	0.44	0.41	0.11	1.08	0.28		
	African American/Black	0.08	0.43	0.02	0.18	0.85		
	Asian/Asian American	0.15	0.57	0.03	0.26	0.79		
	American Indian/Alaskan Native	-0.01	1.91	0.00	0.00	1.00		
	Native Hawaiian/Pacific Islander	-1.82	1.94	-0.08	-0.94	0.35		
	Bi-racial/multiracial	-0.21	0.49	-0.04	-0.44	0.66		
	FaithBasedxBereavement	0.04	0.14	0.03	0.27	0.79		

Note: Dependent Variable: Post Traumatic Growth Relating to Others Score - T1