
Paul Lomax

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EVERY PARENT’S WORST NIGHTMARE: SURVEILLANCE OF CRITERIA-BASED RAMPAGE SCHOOL SHOOTERS, 1995-2015

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the degree of Doctor of Education

By

Paul Lomax

December 2016
EVERY PARENT’S WORST NIGHTMARE: SURVEILLANCE OF CRITERIA-BASED RAMPAGE SCHOOL SHOOTERS, 1995-2015

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ABSTRACT

EVERY PARENT’S WORST NIGHTMARE: SURVEILLANCE OF CRITERIA-BASED RAMPAGE SCHOOL SHOOTERS, 1995-2015

By

Paul Lomax

December 2016

Dissertation supervised by Dr. Carol S. Parke

Rampage School Shootings (RSS) are a violation of one’s right to life, liberty, and the pursuit of individual happiness. Little children, school teachers head out to school, only to never return home at the end of the day. Idiosyncratic psycho-social behaviors drive Rampage School Shooter (RSS) violence. The fact of the matter remains true; Rampage School Shooters don’t “… just snap”… They plan”.

This descriptive, exploratory study consists of RSS cases (N=59) derived from triangulated, retrospective, historical accounts (1995-2015). A quantitative, non-experimental research design was employed.

The purpose of this epidemiological (i.e., descriptive, exploratory, predictive) investigation is an understanding of biopsychosocial factors associated with criteria-based Rampage School Shootings (1995-2015). Eighteen RSS variables (i.e., behavioral attributes)
were abstracted from the literature. RSS variables were statistically analyzed using descriptive statistics, Pearson Correlation, One-Way Analysis of Variance (ANOVA), Chi Square, an independent t-Test, and Standard Multiple Regression (IBM SPSS® Statistics 22 for Windows).

This study is driven by two research questions:

Question 1: Is there an association a) between RSS assailants 11-36 years of age (1995-2016) and psychological therapy and/or anxiety/depression medication? And b) between the number of RSS deaths and criteria-based RSS assailants who were 11-36 years of age?

Question 2: Which of the following RSS variables is the best predictor of a Rampage School Shooter: a) Age in years; b) Gender; c) Race; d) Attempted Suicide or Successful; or e) Psychological therapy; f) State; g) Anti-social Personality Disorder; h) Internet activity; i) Bullied/Bullying, or j) Schools?

The Biopsychosocial model was utilized to advance prevailing Rampage School Shooting knowledge, particularly with respect to 1) Biological; 2) Psychological; 3) Social; and 4) Environmental factors. Limitations of the study and the potential for further Rampage School Shooter violence investigation are discussed.
DEDICATION

There is nothing noble in being superior to your fellow man; true nobility is being superior to your former self.

— Ernest Hemingway

To Lucille Katherine Lomax, my mother, God’s vessel of ‘Old Testament’ love, education, righteousness, wisdom, *Amygdala truth*, spiritual Scholar-Practitioner. To you – Mom – Purveyor of Existential-Phenomenological Truth, I extend the entire intellectual breath and biopsychosocial knowledge of this study to your psychosocial *sacrifice*, personal struggle to advance truth and knowledge when racial motes about thee remained as thick as thieves. Through it all, beyond the pale and drudge of the psychological mud and generational shame and grave-stricken memories, you persevered to build a spiritual-healing abode for the neighborhood, kept the *faith*, tarried forth to rise above everyone, guiding my path, pointing the way to the understanding of education, sound knowledge, and unprecedented reason – capability, commitment, and confidence. To my Mother, I DEDICATE this Doctoral degree in Professional Education and Leadership (Ed.D.), who I love and miss dearly.

Gwendolyn Lomax-Martin, my beloved sister who passed away far too soon from a personally devastating circumstance, I know you have met a much-deserved peace. To you dear sister, I also dedicate this investigation with my love and immense gratitude.

To Dr. Parke (Dissertation Chair), Dr. McCown, and Dr. Gittins: Your professional time, educational and statistical guidance, support was sincerely appreciated throughout my journeyed ‘marathon’…

To Cohort 3 and Dr. Stephanie McHugh (Cohort 3 classmate), a very special thanks to you ALL for making our Cohort truly ‘special’.
ACKNOWLEDGEMENT

Amygdala Blue

In Bicêtre and Salpêtrière
folie à deux rage as gyri spine, —
pelicans pine
buttocks whine
i want    must have
Mine…

Chained whispers passed a fleet of muses
Anne: Gertrude:    Silvia:    Virginia:
dropping anchors along Ports of Epididymis
searching for love in garden-spun germ states
while Little Hans locked the gates
to go beat Bonaparte sausage        anxiously
No mother    why must i come in
my object has no relation.

Just go    play your concerto
walk away with your dancing uterus
dangle your stitchcraft before
grey women crying for
*Little House On the Prairie*.

This is such a splendid condition
as refined as polished cherry wood
as comfortable as Grandpa’s
stained sunken chair.

But after loving you & you & you
after listening to Cerberus barking
i still wonder    am i living
conditions of Medusa hissing:
moderately sad
    essentially mad…

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Chapter 1

Introduction

We live in incredibly trying times, face enormous sociopolitical challenges. In her latest’s book, *The Silo Effect*, Tett (2015) discussed the development of socio-psychological changes characterized across and within corporate American “… departments, which often fail to talk to each other – let alone collaborate. People … live in separate mental and societal ‘ghettos’, talking and coexisting only with people like us” (p. 13). Secondary associations abound regarding the possible affect upon the American family and educational system. Moreover, said factors contribute to increasing episodes of psychosocial stress and individualized strain (i.e., mental health issues), gun-related deaths decimating various family structures, workplace violence, Church ceremony homicides, Theater viewings, and, of course, the United States (US) educational system culture (i.e., elementary schools, middle schools, high schools, colleges, and universities) (Lakoff, 2009).

One significant notion driving my research is the lack of an operational definition ascribed to the prevalence of ‘Mental Health’ violence in our school system. Many professionals hold different notions about its meaning, societal significance, as well as how to describe its characteristics. Despite the incredible amount of socio-political rhetoric bantered about regarding one’s mental status, social-economic status (SES), and intelligence quotient (IQ), the fact of the matter remains true – ‘Mental Health’ and Rampage School Shootings remain exceptionally controversial issues affecting all facets of our postmodern society.

According to Smith (2006) and McNiel, Borum, Douglas, Hart, Lyon, Sullivan, & Hemphill, (2002), school violence is reported as “… a complex behavior with multiple determinants, manifestations, and outcomes” (p. 153). Chapter 1 includes an introduction to and a definition of Rampage School Shooters (RSS), a discussion of the problem driving the study,
followed by the purpose and significance of the study. Chapter 2 is composed of three significant sections: 1) Theoretical Framework (Biopsychosocial Model); 2) Literature Review, and 3) the Context Review. Relevant Improvement Strategy is announced. Chapter 3 addresses intricate aspects of my Dissertation Methodology: 1) Measures and Variables; 2) Criteria-based case Selection; 3) RSS Data Management Process Flow; and 4) Data-Driven Decision-making Framework (DDDM). Chapter 4 identifies and discusses results obtained from the following statistical analyses – ANOVA, Chi Square, and Standard Multiple Regression. Chapter 5 concludes with an in-depth discussion of the overall study, followed by concluding remarks and a note on limitations.

**Rampage School Shooters Defined**

The *Merriam-Webster, Oxford English, Cambridge Online Dictionaries* have not defined or documented any reference to the meaning of a Rampage School Shooter. However, American schools and communities (i.e., urban, suburban, etc.) know first-hand, the mind-numbing, tragic impact and/or outcome of an unforgettable event as a Rampage School Shooting.

Newman (2004) and Roque (2011) defined Rampage School violence as random acts of mass murders in school specifically aimed at more than one student and victim. The operational definition of a Nontraditional school shooting includes unrelated to gangs, urban problems, minority or ethnic status, gangland warfare, drugs or armed robbery or extortion criminal activity. Moore, Petrie, Braga, and McLaughlin (2003) “… defined adolescent mass murder as the intentional killing of at least three victims (other than the perpetrator) in a single incident by an individual age 19 or Younger” (Moore, Petrie, Braga, and McLaughlin, 2003, p. 318). Langman (2009a) reported “Rampage school shootings do not include shootings of specific individuals due to a conflict … i.e., rival gang shootings, shootings resulting from conflicts over
a drug deal, and so on…” (p. 80). Langman (2009b, 2013) classified RSS using a typology-scale, which influenced tremendously the underlying basis of my investigation:

*Psychopathic shooters*: were profoundly narcissistic, arrogant, and entitled; they lacked empathy and met their needs at others expense. In contrast, *psychotic shooters* suffered from schizophrenia or a related disorder. They were out of touch with reality to varying degrees, experiencing hallucinations or delusions. Unlike the psychopathic or psychotic shooters, who generally came from well-functioning, intact families, *traumatized shooters*, endured chronic abuse as children. They grew up in violent, severely dysfunctional homes (p. 3).

Other researchers identified five classes of school shooters: 1) governmental shootings; 2) mass shootings; 3) targeted shootings; 4) terrorist shootings; and 5) rampage shootings (Muschert, 2007; Mongan, 2013).

A thorough and scientific distinction between a Rampage School Shooter and a Serial or Mass Killer is needed (Muschert, 2005; Mongan, 2013). On first blush, I believe there is no biopsychosocial difference distinguishing the two. Evidence supporting my contention rests with Professor Egger’s definition:

A serial murder is when one or more individuals (men, in most of the cases) commit a second murder and / or another subsequent homicide; it is not predetermined (there is no prior relationship between the author and victim); it comes at a distinct time and apparently it is unrelated to the original murder… In addition, the motive is not material gaining, but it seems to be a desire to exercise power over the victim… Also, they are often perceived as not being too strong, because of their situation in time and space and their status in the environment to which they belong (homeless, prostitutes, migrant workers, homosexuals, lost children, single or elderly women) (Ioana, 2013, p. 324).

**Statement of the Problem**

As human beings, we exist within a hierarchy of Natural, multilevel Systems (i.e., multi-dimensions) governed by environmental principles, unique homeostatic mechanisms, and psychological sensibilities. The underlying psychosocial thesis driving my dissertation problem of practice remains no exception. In no uncertain terms, young Rampage School assailants continue to ravage public school system culture, committing *unspeakable* homicides and
suicides. Therefore, rational precepts are warranted to decipher irrational manifestos, to scientifically understand root causes of this emerging phenomenon. In other words: “as within, so without”. So, until an RSS etiology is obtained, or significant factors are systematically and scientifically determined, a ‘New Normal’ will not only override school system mission and vision, but also disrupt the social fabric of communities throughout the nation.

Crepeau-Hobson (2014) argued school injuries and deaths impact the underlying foundation of the educational system. Several researchers reported dramatic occurrences of negative affect contributed to the increased rates of psychopathy and suicide during adolescent development (Casey, Jones, Levita, Libby, Pattwell, Ruberry, Soliman, and Somerville, 2010). According to the Surgeon General’s Mental Health report (U.S. Department of Health and Human Services, 2001), youth violence injuries and death severely impacts not only victims and their families, but also produces indelible psychosocial effects on the local community’s health and wellbeing.

You could tell he was … a genius… He’d correct people’s Latin homework… and at 16 was among the list of top students in his English class… He was also a technical whiz kid, keen on computers and video games, and part of a group who would meet up for computer programming get-togethers (Blumenfeld, 2012).

Towards the end of the 20th Century, during a period when the thought of mass school violence lay far beneath mainstream’s radar, the Journal of the American Medical Association published a study citing the incidence of US school-associated violent deaths. The findings from that study from 1994-1999 showed

…220 events resulting in 253 deaths were identified; 202 events involved 1 death and 18 involved multiple deaths … Of the 220 events, 172 were homicides, 30 were suicides, 11 were homicide-suicides, 5 were legal intervention deaths, and 2 were unintentional firearm-related deaths. Students accounted for 172 (68.0%) of these deaths, resulting in
an estimated average annual incidence of 0.068 per 100,000 students. (Anderson, Kaufman, Simon, Barrios, Paulozzi et al., 2001, p. 2695).

On October 24, 2014, a high school freshman (Washington State) “… opened fire in the cafeteria, killing a girl and striking two boys and two other girls in the head before turning his gun on himself and committing suicide. The students hit by gunfire were seriously injured” (Johnson, Lovett, and Paulson, 2014). In 2012, after first murdering his mother in their home, 20-year-old Adam Lanza entered Sandy Hook Elementary School (Newton, Connecticut), and killed 20 children and 6 adults, before committing suicide.

…lack conscience and feelings for others, taking what they want and doing what they like, without having the slightest trace of regret or guilt… This psychopath term is used when the psychological, biological and genetic factors as well as the social influences and childhood experiences helped to develop the syndrome (Langman, 2015; Ioana, 2013, p. 324).

Evidence-based information proposed RSS are characterized by idiosyncratic, biopsychosocial factors and/or stressors (American Academy of Child and Adolescent Psychiatry, December 2011; Moore, Petrie, Braga, and McLaughlin, 2003; Smith, 2006; McNiel, Borum, Douglas, Hart, Lyon, Sullivan, & Hemphill, 2002). Moreover, the data shows school violence assailant(s) identified is (are) typically young adolescent/young-adult male(s), struggling mightily with ‘identity’ psychopathology.

On March 21, 2005, the Red Lake reservation in Red Lake, Minnesota … 16-year-old Jeffrey Weise killed his police sergeant grandfather and his grandfather’s girlfriend, then later drove his grandfather’s police vehicle to Red Lake Senior High School where, at 2:45 p.m., he began shooting, killed seven people on the school campus, including five students, one teacher and an unarmed security guard, and wounded five others. The shooting ended when Weise committed suicide (Blumenfeld, 2012).
Purpose of the Study

For several decades, Rampage Shootings were mentioned across the country in various newspapers and local news stations, and not with much fanfare. In the early 1990s, the media began to report more and more of these social anomalies… However, RSS instances are like no other massacre. Larkin (2009) reported “… of all the rampage shootings, Columbine stands out as a cultural watershed…” (p. 1311). The Columbine High School shooting forced every Law Enforcement agency and training center to reorganize their Rescue, Retaliation, and Mass Shooting efforts (see Figure 1). According to Muschert and Larkin (2005), “Columbine was a new sort of attack, and law enforcement agencies were caught off guard in their ability to respond… military experience equated the Columbine attack with contemporary styles of urban warfare” (p. 253).

On April 20, 1999, Eric Harris and Dylan Klebold armed themselves with guns and explosives and walked into Columbine High School. They killed twelve students and teacher, and wounded twenty-four others, before taking their own lives. It was the worst school shooting in history (Klebold, 2016, p. xix; see Figure 1).
Figure 1. Eric Harris and Dylan Klebold caught on the high school's security cameras in the cafeteria, 11 minutes before their suicides. Retrieved from http://www.columbine-online.com/killers/columbine-photos-pictures-eric-harris-dylan-klebold.htm.

Not until the publication of a book by Newman (2004) and an informative article written by Muschert (2007), was the term ‘Rampage shooter’ woven into the scientific community and public consciousness. Furthermore, Mongan (2013) and Muschert (2005) acknowledged Newman (2004) for her bold cultural anthropology investigation of specific RSS incidents. Not until a decade later, did the world become introduced to a groundbreaking psychological assessment of RSS behavior across all educational school levels identifying evidence-based connections between mental dispositions/psychological syndromes and the probability for extreme violent behavior (Smith, 2006).

In the opening cover of School Shooters: Understanding high school, college, and adult perpetrators, Langman (2015) wrote “School shootings scare people, even those not immediately affected. They make national and international news. They make parents afraid to send their children off to school”. Not to mention, and of greater import, school shootings place everyone at a greater risk of fatal injury and loss of life. Using evidence-based information
(N=48 school shooters), Langman (2015) further explained 1) why most assumptions about the school perpetrators are wrong, and 2) why many of the warning signs were missed until it was too late. Langman (2015) argued, “if we are to be more successful in preventing these attacks, we need to understand who these shooters are, what drives them to kill, and how we can spot them before it’s too late” (p. xvi).

Left unaddressed, overt acts of school violence and other common forms of victimization can erode the climate of the school, damage the resilience-promoting influence of schools, and leave many students to suffer in silence with diminished personal wellness and resilience capacity. Efforts to reduce violence at school, therefore, must be multifaceted. (NASP, n.d.).

Several investigators assert why Rampage School shooters remain ‘motivated’ to commit such heinous school acts (i.e., psychoanalytical theatrical performance) is supported by the following information.

An institutional attack takes place on a public stage before an audience, is committed by a member of former member of the institution, and involves multiple victims, some chosen for their symbolic significance or at random. This final condition signifies that it is the organization, not the individuals, who are important (Mongan, 2013, p. 4; Newman, 2004, p. 231; Muschert, 2007, p. 63).

The primary step in understanding Rampage Shootings as an emerging phenomenon begins with a scientific assessment, or appraisal, of biological, psychological, and social constructs of ‘being’ which, invariably, contribute to a displaced and often pathological personhood and/or selfdom. The purpose of this epidemiological (i.e., descriptive, exploratory) dissertation investigation of Retrospective Historical Rampage School assailant cases is not only to gain an understanding of biopsychosocial constructs of ‘being’, but also a significant means in the attainment of a reasonable school safety improvement strategy (Gittins, 2014).

**Research Questions.** Mental health has become the banner of social discussion on a daily basis. Almost every industry, occupation, personal situation, military, political and
educational arena are affected by this relative discussion. In more cases than not, when stress is added to the equation, a constellation of signs symptoms, take center stage, adding considerable biopsychosocial evidence to debate the various complex interactions fueling the relationship between stress and psychiatric illness (see Figure 3). How amazing it is to discover the therapeutic power of joy, laughter – an anti-stress agent – as medicine to the soul and spirit of a person suffering from depression or heart disease. Is it any wonder, stress has many names – anxiety, fatigue, tension, overwhelmed – and yet each one can produce the same biopsychosocial outcome? Is it any wonder, stressful life events (psychosocial) are the second highest cause of mental disorders (Jones and Bright, 2007)?

Eighteen RSS variables (i.e., behavioral attributes) were abstracted from the literature. This study is driven by two research questions:

- **Question 1:** Is there an association between
  a) RSS assailants 11-36 years of age (1995-2016) and psychological therapy and/or anxiety/depression medication?
  b) the number of RSS deaths and criteria-based RSS assailants who were 11-36 years of age?

- **Question 2:** Which of the following variables is the best predictor of a Rampage School Shooter?
  a) Age in years;
  b) Gender;
  c) Race;
  c) Attempted Suicide or Successful;
  d) Psychological therapy;
  e) State;
  f) Anti-social Personality Disorder;
  g) Internet;
  h) Bullied;
  i) Schools.

The Biopsychosocial model is used to not only advance the prevailing definition of Rampage School Shooting – perceived or imagined – with respect to 1) Biological; 2) Psychological; 3) Social; and 4) Environmental factors (see Figure 6), but of greater import, to
assist in the understanding of a critically disturbing emerging Educational and Public Health dilemma.

**Significance of the Study**

Newman (2004) reported “… there is nothing spontaneous about a rampage school shooting” (p. 21). Moreover, by virtue of the diversity of biopsychosocial attributes contributing to its etiology, every Rampage Shooter incident is individually distinct (Mongan, 2013). In other words, Rampage school shooters do not commit random school murders for the sake of killing. According to Mongan (2013) and Langman (2015), rampage violence results from a deeply engrained, diabolical and/or psychopathological sub-consciousness. More often than not, Rampage school shooters, thrive on the development of well-planned assault missions against the archetypal educational order – developed and historically governed by political (Lakoff, 2009), religious, ethnic/racial founders and financiers. Through mortifying acts of school violence, RSS intend to convey a primitive, stark message throughout all manner of modern institutionalisms (Mongan, 2013; Newman, 2004; Muschert, 2007).

Even after studying such attacks, I find that I have not become hardened to the horror. Instead, I seem more vulnerable to the suffering of others, my heart sinking with the heaviness of “No, not again,” as we are a nation and a world community one more time are left to ponder the causes of rampage attacks and what can be done to prevent large-scale violence in our schools (Langman, 2015, p. xv).

Assumptions, presuppositions, and notions that Rampage School violence is a misnomer, a psychosocial fantasy, is just not true. School violence is an unvirtuous reality. I believe everyone will honor this as an uncontested truth. So it is that today’s adolescents are suffering psychosocially and at a greater intensity than of previous generations. At its deepest core, biopsychosocial etiology shows a common thread – a catalyst or triggers – yet to be discovered within the assailants’ environment which may contribute to these vile, wretched acts of school
homicides and/or suicide. The fact of the matter remains true; today’s Rampage School Shooters don’t “… ‘just snap’… They plan” (U.S. Secret Service, 2002, p. 11).

According to Newman (2004) and Mongan (2013), approximately 29 Rampage School Shootings were documented from 1974-2008 within the United States. At issue, Rampage school violence continues to: 1) account for an increase in the prevalence rates of school homicide rates; and 2) place an enormous amount of life-threatening stress (i.e., safety protocols/staff and teacher training, financial burden, mental health awareness, etc.) upon the US public school system.


Subsequently,

Why is this research study significant and needed? This is not a simple topic. School shooters defy easy analysis… There is no one cause of school shootings, there is no one intervention that will prevent school shootings… there is no one profile of a school shooter… School shooters cannot be reduced to a [particular] stereotype (Langman, 2015, p. 1).
Chapter 2

Crowne (2007) considered adolescence a stormy stage of development, worthy of considerable discussion, arguing, in reference to Erik Erikson’s 5th Stage of Development – Identity vs. Identity Confusion – the following intellectual evidence may support the underlying cause for what may have transpired in the mind of the adolescent assailant responsible for the Arapaho school shooting.

Afraid of making mistakes and not certain whom to believe, the adolescent can be wildly variable – self-conscious and withdrawing, exuberant and full of abandon – captivated by one cause or another. Identity confusion is painful, and in some it endures for a long time – into the twenties and beyond. We may guess that dropping out of school, drug use, indiscriminate sexual behavior, and confrontational and rebellious relationships with parents and teachers are signs of identity confusion (Crowne, 2007, p. 207).

By nature, humans are social beings, capable of speech and literal communication, emotional expressions, and caring for one another. These aspects of the human experience contribute to the overall health and wellness of good quality of life. More to the point, these qualities are critical to the educational process our children demand, and by Nature, hunger for. However, Lakoff (2009) argued “Neuroscience and Social Science have come to an agreement that certain aspects ascribing to the Human Condition – personality and psychological needs…” (p. 199), imparts considerable impact on one’s specific Central Nervous System neurophysiological capacity and/or capabilities.

Dissertation Theoretical Framework

The Biopsychosocial (BPS) Model. At the forefront of issues plaguing our society, exists a wellspring of biopsychosocial ‘matters’ engulfing humanities’ health and wellness. Health promotion is the outcropping of Matarazzo’s (1982) definition: … the total summation of scholar-practitioner’s capability and professional integrity to promote and sustain health, prevent and treat ethically illnesses, all while aiding in the advancement and improvement of the health
care system and health policy legislation (Marks et al., 2008). Because of my biopsychosocial beliefs in addressing individual ailments, meaning we are more often than not affected by both environmental (Gittins, 2014) and internal insults, I am inclined to consider a holistic or collective-action model which considers the whole person. Perhaps, the greatest reason for my attraction to this approach is its underlying non-Western nature which addresses, in some Jungian perspective, the Yin-Yang (balance) of the whole person, while placing considerable emphasis on the spiritual energy – critical consciousness (Freire, 1973; as cited in Marks et al., 2008) – and the individual Nature of us all.

When asked about my ‘health’, I more often than not respond with a superficial, rather impersonal answer, particularly asked by within a workplace colleague or speaking with a stranger in passing. Everyone agrees, personal health information is profoundly personal and private; information reserved for people within one’s social network (family, relationship, Face Book, close friends, etc.). How realistic are we with following our doctor’s recommendation to stay away from excessive use of salt and sweets, or making certain promises to exercise often? How realistic are we about socializing with friends into the early dawn, instead of staying home to study for a very important final? Are we mindful and considerate of others? Are we responsible for our choices, trustworthy, and interested in furthering our career/profession? Do you have a positive self-image? Do you have effective coping strategies for stress? Are you attracted to or frequently find yourself involved in ‘unhealthy’ relationships?

Health is invariably tied to the intricacies and individualized choices accompanying the human condition. Moreover, health and wellbeing remain entwined to one’s state of mindfulness and quality of life: 1) Psychological state of being (feelings, emotions, etc.); 2) Biological constructs (phenotype, genotype, race, ethnicity, family history of illness, etc.); 3) Social
experiences (behavior, attitude, personality, phenomenological); and 4) “… macrocultural variables” (Suls & Rothman, 2004, p. 119). Over time, Psychological/psychiatric professionals, social workers, and other researchers began to refer to this equilibrium approach of being, as the Biopsychosocial (BPS) model (Anderson, 1998; Engel, 1977; Kaplan, 1990; Matarazzo, 1980; Schwartz, 1982; Schwartz & Weiss, 1978; as cited in Suls & Rothman, 2004, p. 119).

George L. Engel (1913-1999) is regarded as the most influential proponent of the Biopsychosocial Model (Adler, 2009; Pilgrim, 2002; Epstein and Borrell-Carrio, 2005; Dogar, 2007; Borrell-Carrio, Suchman, and Epstein, 2004; Cohen, 2000; Ghaemi, 2009; and Ingham, Clarke, and James, 2008). According to Borrell-Carrio, Suchman, and Epstein (2004), Engel formulated the BPS model as a result of his disenchantment with the limitations of the longstanding biomedical model.

The dominant model of disease today is biomedical, and it leaves no room within this framework for the social, psychological, and behavioral dimensions of illness. A biopsychosocial model is proposed that provides a blueprint for research, a framework for teaching, and a design for action in the real world of health care (Engel, 1977, p. 129).

Engel’s innovative leadership advanced significant multidisciplinary, academic studies encompassing internal medicine, psychosomatic medicine, neurology, and psychiatry. Epstein and Borrell-Carrio (2005) reported the BPS model transcends its historical label as a philosophical concept. In their view, the BPS model is not only the best tool to assist medical practitioners improve their practice of medicine, but also is an ideal venue to transition from “being biopsychosocial…to an ongoing process of becoming biopsychosocial” (p. 426). Smith (2002) reported the BPS model “… prompted a revolution in medical thinking… [that] better linked medicine to science” (p. 309). According to Engel (1980) and Schotte, Van Den Bossche
et al., (2006), the beneficial core of the BPS model resides in its ability to assist in the diagnosis of biopsychological vulnerabilities and cross-system ailments, promulgated by stress-inducing events (i.e., anxiety, depression). In his obituary, published in the *Journal of American Medical Association (JAMA)*, Cohen (2000) stressed Engel’s life-long dedication to the “… growing concern with the interaction of psychological and biological forces in health and illness” (p. 2857).

However, the BPS model has endured sharp criticisms. Ghaemi (2009) asserted the BPS has outlived its day of biomedical vs. eclecticism promise and glory. Postmodern mental health issues present with complex symptomatology for which BPS is not the right tool for the task at hand. According to Bartolo (2010), the BPS model is an individualistic approach more accustomed to understanding the Nature and Nurture (Lakoff, 2009; Pinker, 2004) of person-centered attributes. Ghaemi (2011) further argued, BPS model is “… an unprincipled mixing of many different approaches—and thus is both unscientific and not useful for the progress of psychiatry” (p. 1). Pereira and Smith (2005) established a correlation between psychological influences specific biological processes, which more often than not, leads to an unfavorable environmental and/or social outcome. To better understand the mental status of their patients, Ingham, Clarke, and James (2008) modified the BPS model to incorporate four factors: 1) presenting issues or problems (what precipitated the problems?), 2) precipitating factors (what triggered the problems?), 3) perpetuating factors (what sustains the problems?) and 4) protective factors (what prevents the problem?).

The operational definition of the BPS model claims health/wellness and disease are the direct result of three interactions: 1) biological characteristics (i.e., genetic predispositions); 2) psychological factors (i.e., stress/stress management skills, health beliefs and/or practices, etc.),
and 3) environmental/social influences (i.e., cultural/family relationships, social support, etc.) (Marks, Murray, Evans, Willig, Woodall et al., 2008). Figure 5 illustrates the classical Venn-diagram orientation between bio-psycho-social relationships along a continuum of health and wellness. Note the overlap of various aspects of everyday experiences and emotions and cognitions. And, culminating from the center of all three interactions (i.e., overlaps), is found our centerfold of individual behavior – Mental Health.

With respect to the attributional complexities associated with Rampage School Shooters (RSS), garnered from the incredibly diverse information in the literature citing this occurrence as an emerging phenomenon, I advocate for the separation of Social and Environmental into two distinct BPS classes. What is the basis for this argument?

Figure 6 depicts possible causalities contributing to why RSS assailants fail to develop positive social relationships with friends or specific family members. Genuine relationships are constrained by biopsychosocial attributes prohibiting a positive, fulfilling social interaction. Instead, many RSS perpetrators resort to the Internet and/or Facebook to express vile communications to law enforcement, or school officials, and others, about an impending violent encounter. In comparison with the classical BPS model, Figure 6 shows a 4th area – Environmental - that overlaps the Biological, Social, and Psychological. Please note, the individual aspects of this modified BPS model were developed from numerous sources regarding Mass Shooting suspects in general (i.e., schools, malls, movie theaters, workplace, military bases, etc.). Of particular interest, the central section in Figure 2 – mental health – specifically corresponds to the centralized psychopathological section in figure 3 – Rampage School Shooter (RSS) violence. The basic underlying assumption here is to establish a baseline for my Dissertation investigation regarding the emergence of RSS phenomena. Using criteria-based
variables, I intend to statistically analyze specific criteria-based variables for trends, variances, to determine strength of relationships, etc. Later, a similar diagram will be drawn identifying outcome variables in association with the four areas of my BPS model: 1) Biological; 2) Psychological; Social; and 4) Environmental. Which ones hold true for each section? Does the information agree with the prevailing assertions published within the literature? If so, which areas are considered significant?

Figure 2. The biopsychosocial model of health. Retrieved from https://savvywillingandable.wordpress.com/2013/09/25/the-biopsychosocial-model-explained/.
Literature Review

**Biological.** “Does the psychological state of an individual play a role in the health of an individual, and to what extent can an individual perceptions effect … health and well-being?” (Test and Test, 2014, p. 3). Arango, Olivares, and Buchanan (2000) proposed the association between chronic stress and specific neuropsychiatric syndromes – i.e., bipolar disorder, major depression, post-traumatic stress disorder, and schizophrenia – results in a clinical reduction of hippocampal neurons in the brain. In terms of the specific effects of acute and chronic stress on epinephrine and norepinephrine, specific neurotransmitter changes were reported. Casey, Jones, Levita et al (2010) presented significant research supporting the existence of an adolescent neurobiological model and underdeveloped subcortical limbic structures, which, may be the mechanism for heightened emotional/risky behavior.

Of greater importance, researchers report the increased possibility of a relationship between the number of young boys/men identified as ‘Rampage School Shooters’ and their introduction to “violence exposure” during early childhood development. Specific associative changes were found to occur between and/or within the amygdala, basal ganglia, hippocampus, and the prefrontal cortex (Lewis, Schwebel, Elliott et al., 2015).

**Stress.** Stress is as diverse and varied as the individuals who are affected by it. According to the American Psychological Association (2010), there are different types of stress: 1) acute; 2) episodic acute; 3) chronic. Without getting into the symptomatology of stress, suffice it to say, chronic stress is a difficult phenomenon to manage. According to Miller & Smith, chronic stress is a deleterious condition, which more often than not requires extensive medical/behavioral treatments. If not treated appropriately and monitored adequately, the possibility someone will suffer from suicide, violence, heart attack, and cancer remains high (Miller & Smith; APA,
Chronic stress may even represent itself in the infamous guise of Post-traumatic stress disorder. And, we all know the effects it has wrought upon our military soldiers deployed to Iraq and Afghanistan. For the sake of clarification, a distinction should be made between stress and stressors. The reason for this, in my humble opinion, is that the etiological factors associated with the type of stress usually determine the histological type and perhaps the location of the cancerous growth. Stressors, on the other hand, result from the interaction of particular situations, events and people which serve to induce the perception of stress (Lazarus & Folkman, 1984; Lafreniere & Cramer, 2005). Therefore, treating the body is not actually the same as treating the whole person.

**Storm and Stress Phenomena.** Nearly a century ago, G. Stanley Hall (February 1, 1844–April 24, 1924), a notable Harvard University psychologist, coined the term ‘adolescence’ (Arnett, 1999). Hall argued “… teens are emotionally unstable and pathic. It is a natural impulse to experience hot and perfervid psychic states, and it is characterized by emotionalism” (Hall, 1904, p. 74–75). Because of its resemblance to the German literary movement characterized by intense commitment to objectives, revolution against the Avant-garde, expression of personal emotions, and flights of pain and suffering, Hall classified adolescent development as *Sturm und Drang*, German for Storm and Stress (Muus, 1996). Hall was touted as an outspoken scientist well ahead of his time. His theoretical work regarding the relationship between the expression of certain genetic mediators and physiological factors (Muus, 1996) was scientifically sound, on the one hand, and theologically heretical, on the other. As a result of his Victorian circumstance and divergent perspectives, Hall was both lauded and criticized greatly for his ‘Biogenetic psychology of adolescence’ development theory (Muus, 1996). Despite his criticisms, Hall succeeded in becoming the first professional to successfully receive the internationally renowned
Dr. Sigmund Freud and his then mentee, Dr. Carl G. Jung, along with other notables, as a presenter at the Clark University, where he presided as president (see Figure 4).

According to the classical psychosocial definition, adolescent Storm and Stress phenomena is typically characterized by: 1) conflict with parents; 2) mood disruptions; and 3) risky behavior (Arnett, 1999). However, with the advancement of medical and scientific technology, adolescent Storm and Stress phenomena fell out of favor with the psychological and social science community (Arnett, 1999). After traversing the ‘Storm and Stress phenomena’ literature, I am astonished why investigations have failed to embark upon a leap of evidentiary-faith to assert or theorize a possible association between Storm and Stress phenomena and the increasing prevalence of adolescent school shootings reported in the U.S. public schools. Certainly, I do not refer to the outdated values characterized by Hall’s post-Victorian sensibilities, (i.e., cultural biases and prejudices, etc.), but, of greater import, the discussion involving the inception of a postmodern psychosocial school shooter variant, who is closely associated with evolutionary-psychology theoretical concepts…
Research reported a positive correlation between adolescent sensation-seeking behaviors (i.e., gambling, fast cars, high-risk athletics, nightclubs and partying, drugs and alcohol, gang-banging, chronic fighting, and bullying) and specific personality characteristics: 1) aggression; 2) antisocial personality disorder; 3) impulsivity (Joireman, Anderson, & Strathman, 2003). In some psychological circles, risk-taking behavior is synonymous with sensation-seeking behavior. Similarly, studies have identified a positive correlation between sensation-seeking behaviors (risky-behaviors) – gambling, fast cars, high-risk athletics, nightclubs and partying, drugs and alcohol, gang-banging, chronic fighting, and bullying – and specific personality characteristics: 1) aggression; 2) antisocial personality; 3) impulsivity (Joireman, Anderson, & Strathman, 2003). Several researchers identified significant associations between adolescence, risk-taking behaviors and increased susceptibilities to specific psychopathological disorders (Bava and
Results of the National Comorbidity Survey Replication study, which entailed in-person household assessments of over 9,000 people representative of the United States population (conducted from February 2001 to April of 2003), have indicated that the peak age of onset for having any mental health disorder is 14 years (Giedd, Keshavan, and Paus, 2008; Kessler, Berglund, Demler, Merikangas, and Walters, 2005; Paus, Keshayan, and Giedd, 2008, p. 6).

The identification of adolescence with violent ‘storm and stress phenomena’ remains a skeptical prospect at best. Dramatic occurrences of negative affect have been theorized to account for the increased rates of psychopathy during adolescent development (Hall, 1904; Erikson, 1968; Bandura, 1989), fails to objectively explain 1) “… negative influence on the student in the school…” (Gittins, 2014, p. 36), as well as 2) the increasing high prevalence rates of Rampage school violence/suicide rates affecting United States (US) public schools (Casey, Jones, Levita, Libby, Pattwell et al., 2010; O’Toole, 2000; Borum, Cornell, Modzeleski, and Jimerson, 2010; Langman, 2009; Newman, 2004; Fessenden, 2000; Anderson, Kaufman, Simon, Barrios, Paulozzi et al., 2001; Verlinden, Hersen, and Thomas, 2000; McGee and DeBernardo, 1999; Meloy, Hempel, Mohandie, Shiva, and Gray, 2001; Hurford, Lindskog, Cole, Jackson, Thomasson et al., 2010). In truth, Rampage School Shootings remain ... the unthinkable, a postmodern ‘horror’ scientific narrative, according to evolved, unimagined, ‘Storm-and-Stress phenomenon, that has come home to roost. Imagine, if you will, how society would have processed this had adolescents in G. Stanley Hall’s day committed fatal school crimes, and then chose to end their lives in the outset?

**Depression.** Depression is a psychologically debilitating disorder that disrupts everyone’s quality of life. Depression devastates a person’s ability to have meaningful friendships, celebrate life. This ailment has no political predilection, does not discriminate on the
basis of age, color, gender, sexual orientation, race, religion, national origin, or disability. In other words, depression violates every positive aspect of the human experience.

Depression is awful beyond words or sounds or images... It bleeds relationships through suspicion, lack of confidence and self-respect, the inability to enjoy life, to walk or talk or think normally, the exhaustion, the night terrors, the day terrors. There is nothing good to be said for it except that it gives you the experience of how it must be to be old, to be old and sick, to be dying; to be slow of mind, to be lacking in grace, polish, and coordination; to be ugly; to have no belief in the possibilities of life, the pleasures of sex, the exquisiteness of music, or the ability to make yourself and others laugh. (Jamison, 1995, p. 217)

Unfortunately, once diagnosed with depression, and because of social stigma and a lack of confidence in the confidentiality of medical disorders, many patients refuse to attend medical treatments or comply with medical prescriptions (Carmody, 2005). Bracken and Reintjes (2010) classifies depression as a significant mental health disorder that distresses both the individual relatives, friends, or close associates. Bartolomucci and Leopardi (2009) defined major depression as “… a severe, life-threatening, and widespread psychiatric disorder having an incidence of about 340 million cases worldwide” (p.1). According to Schotte, Van Den Bossche, Doncker, Claes, and Cosyns (2006), depression occurs as the direct result of the convergence of overwhelming idiosyncratic stressors and ineffective psychobiological protective factors, typically resulting in phenomenological interpersonal and psychological risk factors. In Darkness Visible: A Memoir of Madness (1990), William Styron wrote

The madness of depression is, generally speaking, the antithesis of violence. It is a storm indeed, but a storm of murk. Soon evident are the slowed-down responses, near paralysis, psychic energy throttled back close to zero. Ultimately, the body is affected and feels sapped, drained (Goodreads, 2015).

Styron (1925-2006) is the acclaimed author of Sophie’s Choice (1979) and The Confessions of Nat Turner (1967), winner of the Pulitzer Prize in Fiction (1968) and the National Book Award
for Fiction (1980). In my readings of his literary works throughout my earlier years as a Literature student, I often pictured his intrapersonal pain, his war-torn spirit; someone who grappled with deep, existential pain and chronic suffering. James Campbell (2013) described Styron as “… a big man, with … a pleasant face on which the years of depression have left their traces”.

“As far back as the 4th Century B.C., the connection between…” (Sussman, 2007, p. 21) creative artists and their ‘madness’ was sown to their shadows. Throughout modern history, various extraordinary painters and poets – T. S. Elliot, Georgia O’Keefe, Virginia Woolf, Vincent van Gogh, Lord Byron (Sussman, 2007), have struggled with various forms of mental illness.

From 1990-1992 to 2002-2004, 81% of the number of females (aged 5-19 years) who were admitted to the hospital were diagnosed with depression. By 2020, investigative predictions rate depression second to heart disease as “… a global burden of disease” (Arns & Sumich, 2007; Bracken and Reintjes, 2010; Chapman & Perry, 2008, p. 1). Moreover, specific mental disorders, like depression, “… cost the nation at least $193 annually in lost earnings” (NIMH, 2008). The National Center of Health Statistics (2000) reported depression accounted for nearly two-thirds of the estimated $83 billion in the United States that resulted in decreased productivity and vast numbers of increased workplace absenteeism (Jeffrey, 2008).

According to the CDC (2006), from 1990-2004, there was an 81% increase in the number of females (aged 5-19 years) admitted to the hospital. A study comparing stress levels and outcomes between Black depressed pregnant women and Black non-depressed pregnant women (N = 336), resulted in the depressed group showing: “1) lower gestational age; 2) a greater incidence of prematurity; and 3) lower birth weight” (Field et al, 2009, p. 13). While a number of
Researchers have investigated prevalence of depression among African-Americans, less than a handful of studies have investigated why “… African-American women are understudied and misdiagnosed as a group” (Bailey et al., 2009; Carrington, 2006). Lazear et al., (2008) reported the number of women (12.3%) affected by depression is nearly twice as many as men (6.7%).

Hardest hit are women, non-Hispanic blacks, and those in middle age, between 40 and 59 years of age, where rates were higher than among other demographic groups. Americans living below the poverty level were more likely to be depressed than those with higher incomes … (Jeffrey, 2008).

Early on, during the onset of the Vietnam War and at the height of the Civil Rights Movement, psychologists passionately debated the existence of depression in children and adolescents. Rie (1966) went on the record arguing, to my astonishment, “… children were incapable of depression because … children were too psychologically immature to develop depression” (Bracken and Reintjes, 2010, p. 41). It wasn’t until the mid-1970’s to early 1980’s, that the psychological research community and medical researchers began to understand the psychological nature of depressive symptoms in children in adolescents (Kashani et al., 1981; as cited in Bracken and Reintjes, 2010). Nearly twenty years later, and according to Reynolds and Johnston (1994), nearly 20% of the adolescent population is projected to experience symptoms attributable to depression during childhood and/or adolescent development (Bracken and Reintjes, 2010).

The association between depression and its ability to increase one’s vulnerability to stress is well documented (Eberhart & Hammen, 2010). Children comprise a special group who are more susceptible to the negative effects of complex traumatic events – sexual, emotional, and physical abuse, oftentimes expressed through willful or unintentional neglect, personal loss, and witnessing domestic and community violence – placing them at a higher risk for long-term psychological damage (Gabowitz, Zucker, and Cook, 2008). Often, research showed, children
develop coping strategies that includes a consciously restricting processing of the life-threatening events, thus deregulating emotional systems, disrupting attachment processes, and interfering with normal communication abilities (Cook, Spinazzola, Ford et al., 2007). However, resilience to stress and the tolerance for specific stressors varies idiosyncratically. According to Borum (2000), research showed children and adolescents are not only susceptible to stressful life events, but also are prone to develop violent behaviors following exposure. Documented evidence shows a direct correlation between suicide and depression (Halgin & Whitbourne, 2007; Jamison, 1995; NSSP, n.d.), with a lethal age of incidence occurring in the United States (US) between 10 and 24 years of age (Suicide Prevention, CDC, 2008).

Post-traumatic Stress Disorder (PTSD). The relationship between fear and all aspects of human behavior (Gittins, 2014), remains a universal constant. One might venture further to conjecture whether or not ‘fear’ presents as an innate quality in the development of what we all imagine of the Human Condition. W. H. R. Rivers (1864-1922), an anthropologist-psychiatrist, was perhaps the first to introduce fear and trauma, well before hysteria hit the global psychological literature. Mitchell (2000) wrote

... soldiers in the American Civil War… must have feared death before the blow. However, in addition to the preceding terror are the post hoc fears. The physical and chemical components of modern warfare have subsequent effects… most people exposed to such warfare from Hiroshima onwards must live with the permanent fear of the unknown effects, in all warfare … fear of annihilation or of possession by an unknown deadly disease or vengeful enemy is omnipotent (p. 28-29).

Mott (1916) and Mott (1917) reported in 1915, shell shock was considered a neuropathological entity (as cited in Jones et al., 2007, p. 1641). Soon thereafter, it was reported the psychiatric community, withdrew their psychiatric opinion regarding the correlation between cerebral trauma and shell shock manifestations, relegating instead, said neurophysiological
symptomatology to 'traumatic neuroses' (Myers, 1915; Salmon, 1917; as cited in Jones et al., 2007, p. 1641). The introduction of this phenomenon to the psychological community via the Diagnostic and Statistical Manual II [American Psychological Association, 1968] was attributed to Dobbs and Wilson (1960) who studied two groups of World War II (n=19) and Korean War (n=2) veterans: Group A included "decompensated" male combat veterans (n=8) diagnosed with combat neurosis, and Group B included male "decompensated" combat veterans of the same age without neurosis. Using cardiac and respirations rates, and electroencephalograms (EEG), the researchers compared these groups to a control Group C of young university students who had never been exposed to combat. The first session involved 5-7 minutes of a resting baseline, which was followed by 8 minutes of combat noises, and then 4 minutes flashing lights. Two results were identified: 1) Group A failed to generate any identifiable data; and 2) the comparison of Group B to the university showed higher baseline cardiac and respiration rates for the all members in Group B (as cited in Blanchard and Buckley, 1999, p. 248)

Clinical researchers define PTSD as "...a pattern of psychological distress following exposure to extreme stress, such as war or being the victim of sexual assault (McNally, 2003; McNally, Bryant, & Ehlers, 2003; Newport & Nemeroff, 2000; as cited in Pinel, 2009, p. 467). Thus, PTSD costs the federal government millions of dollars a year for diagnosis and treatment. In terms of disability, this equates to time away from work, lost wages, and increased project timelines. If the treatment results were favorable, the spending could be justified, however, studies and reports reveal that the treatment is not very effective for many suffering from brain trauma (Trudeau et al., 1998). More successful treatment would equate to healthier veterans, and also care-related cost reduction. As a result, it would be in the best interest of the federal government to work with researchers to find better treatments on both a humanitarian and fiscal
level. Critics, however, have argued that the federal government has been slow to help with funding of PTSD for multiple reasons. According to Trudeau et al. (1998), there are two problems with the PTSD dynamics: 1) treatment may be ineffective; and 2) subgroups of PTSD patients require interventions beyond current clinical acceptable approaches.

Children comprise a special group who are more susceptible to the negative effects of complex traumatic events – sexual, emotional, and physical abuse, oftentimes expressed through willful or unintentional neglect, personal loss, and witnessing domestic and community violence – placing them at a higher risk for long-term psychological damage (Gabowitz, Zucker, and Cook, 2008). Moreover, National Crime Survey reported adolescents were 2.5 times as likely to experience a violent crime as compared to adults (Whitaker & Bastian, 1991; Duncan, 2007). Often, research showed, children develop coping strategies that includes a consciously restricting processing of the life-threatening events, thus deregulating emotional systems, disrupting attachment processes, and interfering with normal communication abilities (Cook, Spinazzola, Ford et al., 2007).

The absence of parental support or impairment of caregiver relationships have been reported to contribute to complex trauma associated with PTSD in children. In one study, an adopted 10-year-old European boy who was adopted from an orphanage was referred for neuropsychological evaluation by his parents after demonstrating episodic dissociation/amnesia, aggression, and difficulty with concentration in school. Following a series of neuropsychological testing, which included PTSD determination, it was found that he suffered from “…severe neglect and loss… evidence of complex trauma symptomatology, including: difficulty regulating emotions and impulses (e.g., aggressive outbursts); negative perception of himself; difficulty with attention; periods of dissociation; and difficulty with interpersonal relationships” (Gabowitz
et al., 2008, p. 170). As a treatment, it was recommended by neuropsychologists to institute a school-based intervention: 1) focusing on developing cognitive skills (visual and communicative interactions); 2) personalized guidance on planning before executing tasks; and 3) improving social interactions through guided instruction on making friends and participating in after-school activities (Gabowitz, Zucker, and Cook, 2008).

**Suicide.** Suicide incidence across the globe has risen dramatically. Some investigators have established a strong correlation between the incidence of suicide and the prevalence of major depression. Others attribute this increase in suicide rates to personal dissatisfaction with life/family, marriage conflicts, loss of job/permanent residence, and exceptionally strong religious/political convictions. With regards to the sudden increase in adolescent suicide in schools, it is unclear of the association between the etiology of depression and adolescent violence. According to the U.S. Secret Service, 78% of school shooters investigated demonstrated suicidal ideation (Vossekui, Fein, Reddy, Borum, & Modzeleski, 2002; Hurford, Lindskog, Cole, Jackson, Thomasson et al., 2010). Stuckey (2007) identified the following as the ‘Worst Campus Shooting’ in his USAToday article.

On April 16, 2007, in Blacksburg, Virginia, a 23-year-old Virginia Tech Student, Cho Seung-Hui, killed two in a dorm, and then killed 30 more two hours later in a classroom building. His suicide brought the death toll to 33, making that shooting rampage the most deadly in U.S. history. Fifteen others were wounded (Blumenfeld, 2012). Langman (2015) reported out of a sample of 48 School Shooters, 22 (45.83%) died by suicide. It was also mentioned, 57% of secondary school shooters were classified as psychopathological and suicidal. However,

School-associated student homicide rates which includes both public and private elementary thru high schools, decreased significantly from academic school years 1992
thru 2006, according to a study released today in the Centers for Disease Control and Prevention (CDC) and *Morbidity and Mortality Weekly Report* (Hayes, 2008).

Why suicide? What is the benefit in choosing to end one’s life, particularly in the absence of a chronic psychological disease, and, mind you, at such an early stage of development? What suicidal statement could one possibly render following the horrific murder of innocent bystanders and, in some cases, parents and teachers? The answer(s) to such questions is undoubtedly complex, determined by multifactorial variables, and, perhaps, in some cases, too complicated to understand scientifically. But for those of us who are more than just curious, certainly trained as mental health scientists, we remain ever on the verge wanting – no – compelled to know… In thus study, it’s not enough to have to delve into the underpinnings, the psychopathic verities reverberating through the shattered, tattered hallways of a broken mind, sensibility undeniably bound for an unspeakable outcome… Yes, this is not enough. And yet, Rampage School violence occurs within the context of suicide. How does one seriously wrap your sense of meaning-making around such a circumstance? To where does one escape when suicide is chosen following mass school shootings?

The link between suicide and homicide is a very real one, and it hasn't been studied nearly enough. It has always struck me about Columbine, people forget they committed suicide. And that's understandable -- it was the least important thing from the public point of view (Fessenden, 2000, p. 2).

**School Counselors.** The educational landscape (changing cultural demographics) has become nearly conquered by considerable stressors (economics, psychological, budgetary, workplace) that not only negatively impact the health and wellness of students, teachers, and school counselors, but also the entire educational mission/vision. Research shows mattering and job performance decrease appreciably as said stressors increase. What is Mattering? According
to Rosenberg and McCullough (1981), mattering is intimately associated with identity and self. It was also discussed, it is the perception of either mattering or not, that lays the groundwork, consciously or subconsciously, for the degradation of self-esteem, an impaired social cohesion, or the development of depression (as cited in Elliott & Grant, 2004). Not surprisingly, self-efficacy, job satisfaction, and School Counselor “Mattering” have reached an unprecedented low within our national education school system. To understand why school counselors, believe their profession as a whole, does not matter to either colleagues or prevailing education administrators, a study was developed by Rayle (2006).

Questions involving job satisfaction and job-related stress were also investigated. Participants completed two surveys – the School Counselor Mattering Scale and the School Counselor Job-Stress Assessment – to assess perceived mattering and job-related stress, in relation to school counselors overall job satisfaction. Results showed school counselors (elementary level) experienced the greatest job satisfaction/lowest levels of job-related stress. Whereas, counselors in high school experienced the greatest job dissatisfaction, coupled with exceptionally high levels of job-related stress (Rayle, 2006). Of particular interest, a significant relationship was found between 1) Job-related stress; 2) Job satisfaction; 3) Perceived Mattering; and 4) Self-efficacy, and ‘Higher-order needs’ of individuals who “… reap the economic, psychological, and social benefits of work and are protected from the consequences of dissatisfaction with their work, including increased physical and psychological stress” (Connolly & Myers, 2003; Kesler, 1990; Leiter & Meechan, 1986; as cited in Rayle, 2006, p. 207).

Moreover, Beehr, Walsh, & Taber’s (1976) identified individually-valued stress – anxiety, depression, job-dissatisfaction, work-life imbalance(s), low self-esteem, and self-reported fatigue – dramatically contributes to the development of coronary heart disease and chronic disease.
Prolonged, undiagnosed job-related role stress (ambiguity or overload), either actual or perceived, similarly impacted individual’s ability (capability) to complete specific job requirements (quantity), to produce above-average high-quality work, and contribute effectively and reliably as a professional team-member. Elliott, Walsh and Taber (1976) reported mattering is a strong personal motivator for both ‘self’ and society. Serving as the basis for their investigation, the authors questioned our sense of who we are (identity), where we fit in this world, as they relate to what others say/think about us (perception). The authors contend if people choose to either alienate/exclude themselves meaningfully from us, if no one listens to what we have to say, then it stands to reason, we do not matter. Therefore, if School Counselors don’t matter to their boss/colleagues, how, then, could they matter, in the sense of providing significant educational counseling to young impressionable students, in the face of a rapidly diminishing self-concept?

**Where do scholars agree? Where do they disagree?**

Specific evidence contends, as a result of declining resources and healthcare inequality, special populations (lower socioeconomic status, poverty-stricken, uneducated) remain at risk for serious cardiovascular disease and mental health disorders (Adler et al., 1993, 1994; Marmot et al., 1997b; Preston & Taubman, 1994; Rogers et al., 2000; Williams, 1990; as cited in Bulatao & Anderson, 2004). Interestingly, evidence also proposed a strong correlation (relationship) between stressful life events/environments and heritability towards specific conditions (Hoffman & Parsons, 1991; Thayer & Friedman, 2004; as cited in Bulatao & Anderson, 2004). The prevailing evidence argues race, in the face of poverty, responds to and is expressed differently between African-American and White students. According to Kraus (2004), “the circumstances of poverty for Latinos and African Americans therefore differ significantly from those of the
Tolan, Lovegrove, and Clark (2013) followed two groups of African-American (N=148) and Latino (N=193) high-risk urban community adolescent males, and reported results of a strong relationship between stress and negative behavioral outcomes. However, the majority of the perpetrators convicted or charged with these heinous acts of violence were both 1) Caucasian, raised in a middle- to high socioeconomic status environment, and, the majority of cases, 2) significantly less exposed “... to aggressive events (Farrell & Sullivan, 2004; Hastings & Kelly, 1997; Shakoor & Chalmers, 1989; Stewart et al., 2002; as cited in Tisak, Wichorek, & Tisak, 2011, p. 367), a detrimental effect theorized to adversely affect cognitive abilities and predisposes one to extreme violence. In a study of 15 school shootings since 1993, James McGee, director of psychology and forensic services at Baltimore’s Sheppard Pratt Hospital, found the assailants to be “usually good students, maybe on the honor roll, and are not well-known to school officials. They're able to blend in with the woodwork until they actually go ballistic” (Jackson, 1999).

Investigative journalists, social scientists, psychologists, and other clinical researchers continue to engage in a heated debate over whether or not ‘Mass Shootings’ are on the rise. On the one hand, investigators adopted a hardline stance arguing Mass Shootings are not increasing (Singal, 2014; Vespa, 2014; Fox, 2013; Kirell, 2014, and The Associated Press, 2012). A group of similar professionals, challenge the aforementioned reports with evidence-based information and statistical results showing, convincingly, that mass shootings are increasing, dramatically (Barrett, 2014; Greene, 2014; Follman, 2015; and Cohen, Azrael, and Miller, 2014). Using Statistical Process Control (SPC) analysis of Mass Shootings, a group of Harvard University School of Public Health scholars, not only shows, in Figures 5 and 6, respectively, “… that public mass shootings have increased” (Cohen, Azrael, and Miller, 2014), but also identified a
‘tripling’ of the mass shooting numbers. Figure 7 further validates the assertion, mass shootings are, in fact, significantly increasing. In their published research report, the Federal Bureau of Investigation (FBI) stated 2012 was their bloodiest year for mass shooter crimes. During that year, approximately “… 90 people were killed and 118 wounded in 21 incidents” (Barrett, 2014). Furthermore, the FBI mentioned two of the most horrifying Rampage killings for that year included: 1) Sandy Hook Elementary school massacre, and 2) the movie theater shooting in Aurora, Colorado.

![More Frequent Mass Shootings Since 2011](chart)

**Figure 5. Tripling of Mass Shootings since 2011.** Adapted from “Rate of Mass Shootings Has Tripled Since 2011, Harvard Research Shows; And: Why claims in the media that mass shootings aren’t increasing are wrong,” by A. P. Cohen, D. Azrael, & M. Miller, 2014, *Mother Jones*. Retrieved from http://www.motherjones.com/print/261796. Copyright 2014 by Mother Jones and the Foundation for National Progress.

What have scholars and/or researchers learned?

Because of the diverse research methodology and unusually small sample size used in many of the Rampage School violence investigations, various outcomes were reported. However, an agreement was observed with regards to dominant race and other psychosocial characteristics. Moore, Petrie, Braga, and McLaughlin (2003) reported the following adolescent mass murderere’s attributes:

… all were male, 80% were white, 70% were described as “loners,” 43% had been bullied by others, 37% came from separated or divorced families, 44% were described as “fantasizers” (daily preoccupation with fantasy games, book, or hobbies), 42% had a
history of violence, 46% had an arrest history, 62% had a substance abuse history, and 23% had a documented psychiatric history (p. 318).

Fessenden (2000) found

- … by far White males, although 18 out of 102 (18%) were Black, and 7 (6.86%) were Asian-American;
- Overall, the racial composition of the Rampage Killers closely mirrored that of the entire U.S. population;
- 6 out of 102 (5.88%) Rampage Killers were female; and demonstrated the same disturbed, aggressive characteristics of the males;
- Of the rampage killers who were over 25, 33.97% had college degrees. Whereas, 33.97% had some college education. Only 8.82% of Rampage Killers surveyed had less than a high school diploma.
- In terms of locale: 30.39 occurred in suburban areas; 24.51% in small, rural areas; and 41.18% were urban crimes (p. 2).

What have scholars said about violent School Shooters?

Aggressive adolescent behavior is no stranger to early educational and social psychologists. Neuropsychological assessment and early intervention reveals significant information regarding the etiology and potential long-term outcome for young children exposed to abuse and violence. Numerous clinical investigations have discovered complex social exposures and/or factors contribute to violent behavior in children and adolescents: 1) Previous aggressive or violent behavior; 2) Exposure to violence in the home and/or community; 3) Genetic (family heredity) factors 4) Exposure to violence in media; 5) Use of drugs and/or alcohol; 6) access to firearms in home; 7) Combination of stressful family socioeconomic factors (poverty, severe Deprivation, marital breakup, single parenting, unemployment, loss of support from extended family); and 8) Neurological insults or trauma (American Academy of Child and Adolescent Psychiatry, December 2011).
As shown in Figure 8, adolescents between the ages of 12 – 18 years of age are at-risk of developing neuropsychological disorders. Schizophrenia, anxiety disorders, and to a lesser degree, mood disorders, affects adolescents more than the other two illnesses. Of greater significance, “Psychiatric disorders with childhood or adolescent onsets tend to be more severe, are frequently undetected early in the illness, and accrue additional co-morbid disorders especially if untreated. Thus, the basis of an early identification and intervention” (Paus, Keshavan, and Giedd, 2008; Giedd, Keshavan, and Paus, 2008, p. 25).

The shooters came from a variety of racial and ethnic backgrounds and ranged in age from 11 to 21 years...Their academic performance ranged from excellent to failing. Few had been diagnosed with any mental disorder prior to the incident, and less than one-third had histories of drug or alcohol abuse (Vossekuil et al., 2002; and Schuster, 2009, p. 43).
Investigators found for those children exposed to traumatic events, the probability of 1) the development of neurophysiological structural and functional refashioning, and the diagnosis of cognitive and/or neuropsychological deficits, is highly probable (Gabowitz, Zucker, and Cook, 2008). These authors further warned

Adolescent’s responses to trauma often involve acting-out, risk-taking, and self-destructive behaviors (e.g., sexual promiscuity, substance abuse, dangerous reenactment behavior, and delinquency), as well as depression, withdrawn behaviors, and somatic complaints. Therefore, it is critical to evaluate youth within their developmental context (p. 166).

Approximately 54 years ago, Bandura, Ross, and Ross (1961) argued aggression was one of the most important global social problems facing humanity. In one of his most celebrated psychological experiments – the Bobo Doll study – Bandura, Ross, and Ross (1961)

…demonstrated how specific behaviors … violent ones … could be learned through the process of observation and imitation without reinforcement provided to either the models or the observers… concluded that children’s observation of adults engaging in these behaviors sends a message to the child that this form of violence is permissible, thus weakening the child’s inhibitions against aggression. The consequence of this observed violence… is an increased probability that a child will respond to future frustrations with aggressive behavior (p. 4).

Studies of children exposed to violence reported the development of a blank or insensitive persona to intense violence over time. A significant portion of these children began to imitate and/or express their feelings through acts of violence. In addition, the greater the degree of emotional or learning problems, the greater the degree of influence violence will have upon a child (AACAP, March 2011).

**Context Review**

**Demographics and statistics.** Allely, Minnis, Thompson, Wilson, and Gillberg (2014) asserted “… multiple… murders … have a very profound societal impact” (p. 288). Rampage killings, in truth, are not a new phenomenon to the U.S. population. In 1966, Charles Whitman introduced this type of crime to the American people when he “… stood on the University of
Texas's tower in 1966, firing his rifle at students, killing 14 people” (Fessenden, 2000, p. 3). It wasn’t until April 20, 1999, in Littleton, Colorado, for Eric Harris and Dylan Klebold to literally succeed in shattering America’s psyche, awakening the public to the horrific reality of Rampage violence and school safety as an emerging Public Health phenomenon (O’Toole, 2000; Borum, Cornell, Modzeleski, and Jimerson, 2010; Langman, 2009; Muschert, 2007; Mongan, 2013; Newman, 2004; Fessenden, 2000; Anderson, Kaufman, Simon, Barrios, Paulozzi et al., 2001; Verlinden, Hersen, and Thomas, 2000; Fessenden, 2000; Lang, 2009; McGee and DeBernardo, 1999; Meloy, Hempel, Mohandie, Shiva, and Gray, 2001; Moore, Petrie, Braga, and McLaughlin, 2003; Hurford, Lindskog, Cole, Jackson, Thomasson et al., 2010; Gittins, 2014).

On the one hand, the Columbine High School massacre crystalized the urgency for mental health awareness and school interventions into the fore of everyday reality. While, on the other hand, this tragedy broke policymaker ground and psychosocial awareness regarding mental illness and guns.

Cullen (2004) and Follman (2015) believe Harris and Klebold was an exceptionally intelligent, willful, and a cunning ‘psychopath’, motivated by rage and revenge. Eric Harris was reported as the mastermind behind the Columbine massacre, and was deemed a deceptively “… cold-blooded, predatory psychopath” with a “… preposterously grand superiority complex, a revulsion for authority and an excruciating need for control” (Cullen, 2004). Moore, Petrie, Braga, and McLaughlin (2003) believes the underlying etiology for the Rampage School shootings reported during the last two decades can be attributed to generalized grievances, either perceived through bullying, or various types of chronic psychopathological imaginings. Of greater import, in the forward of A Mother’s Reckoning (Klebold, 2016), Andre Solomon described the two perpetrators of the Columbine High school fatality as
Eric Harris appears to have been a homicidal psychopath, and Dylan Klebold, a suicidal depressive, and the disparate madesses would not have been turned into murderousness without Harris’s leadership, but something in Eric might have lost motivation without the thrill of dragging Dylan down with him (Klebold, 2016, p. xiv).

Why do adolescents commit homicide and/or suicide? What is the etiology for such incredible, adolescent inhumane behavior in US Schools? The following information was associated with a recent case in which a 16-year-old student wielded a knife in school and injured 21 students:

While executing a search warrant April 9 [2014], police found a handwritten document in Alex's locker, dated three days before the attack, that reads in part: “I can’t wait to see the priceless and helpless looks on the faces of the students of one of the Best Schools in Pennsylvania realize their precious lives are going to be taken by the only one among them that isn't a plebeian,” investigators wrote in the complaint (Born, 2014).

The New York Time’s computerized assessment of 102 rampage murders dating back 50 years showed massacres had “… more to do with society's lack of knowledge of mental health issues, rather than a lack of security. In case after case, family members, teachers and mental health professionals missed or dismissed signs of [psychosocial] deterioration” (Fessenden, 2000).

Between 1992 and 1999, the rate of single-victim student homicides decreased significantly ($P = .03$); however, homicide rates for students killed in multiple-victim events increased ($P = .047$). Most events occurred around the start of the school day, the lunch period, or the end of the school day. (Anderson, Kaufman, Simon, Barrios, Paulozzi et al., 2001, p. 2695).

In Figure 9, Connecticut (n=28) ranks as the state showing the highest U.S. fatal school shooting, followed in order by Colorado (n=19), Minnesota (n=12), and then California (n=13) (Ballotpedia, 2014).
Rampage School Violence ‘Bright Spots’. Recent evidence shows during spring time and in honor to the Columbine High school incident (April 20th 1999), specific individuals, mostly male adolescents, participate in the planning of another episode of Rampage school violence and suicide. According to Bowman (2012), the Cleveland-based National School Safety and Security Services has assembled national information from 2000-2010 that corroborates law enforcement and/or police investigations that have successfully aborted mass and/or targeted school shootings.

On April 10, 2015, in Pasadena, California, a 16 and 17-year-old “… were arrested Monday on charges of criminal threats after South Pasadena police believe the teens were
plotting a mass shooting, threatening to kill students and staff, at South Pasadena High” (Glazier, 2015). Apparently, the police were forewarned and had the two boys under surveillance for nearly a week. Law enforcement officials needed further evidence of a plot to commit Rampage school massacre before an intervention could ensue. Search warrants and other procedures were actively employed throughout the sting operation and the boy’s internet and e-mail activities were intimately monitored.

Coincidentally, on April 10, 2015, in Denver, Colorado, 3 ‘Denver Middle School’ students were arrested by the police, ages unknown. Two guns and a smoke device were found in their possession. No injuries were reported. Apparently, several students contacted the police about suspicious activity (Bryson, 2015). A large number of interesting readers responded passionately to the reporting of this article. One particular response, in my opinion, speaks to the national sentiment regarding this emerging psychosocial problem

Sickening. You can complain about the government, the President, etc. all you want, but the bottom line is: Where are the parents? Why are little Johnny and Susie bringing guns and amo [ammonition] to school? Where did they get it from? Why wasn't it under lock and key? What were these kids thinking? If someone got injured or killed, everyone would be screaming.... Where do these kids get these ideas? Parents are not watching or paying enough attention to them...kids need supervision and love...and this is Middle School! (Barb, 2015, as cited in Bryson, 2015).

During the first of May, 2014, a 17-year-old was arrested for planning to first murder his parents, sister, and then, target other high school students (Waseca, Minnesota). His plot was foiled when a concerned neighbor became frightened over suspicious activities and reported this to the police. The police entered his garage facility and found an assortment of explosive and dangerous materials, a 180-page notebook outlining the plan of attack, and firearms, with 400 rounds of ammunition and a Barretta 9 mm handgun. It was also reported he was an admirer of
the Columbine High school shooters, and was looking forward to honoring its anniversary (Bazo, 2014).

In October of 2013, police foiled a mass murder plot aimed at the Volunteer Comprehensive High school (Hawkins County, TN). Two male teen agers – 16 and 17 years of age – were arrested and vast amounts of materials detailing the Columbine school shooting were confiscated “…correcting ‘mistakes’ made by those shooters for the purpose of maximizing the number of student and faculty deaths in their planned Volunteer High School massacre” (Bobo, 2014).

**The Copycat Effect.** Unbeknownst to me, and I imagine a large part of the population at large, several instances of school shooter violence transpired as a result of highly publicized media reports and renowned Hollywood movies. In all of my understanding espoused from clinical neurological research, it had never occurred to me that such a phenomenon could become a fatal national reality from simply indulging in violent movies. None of this clicked, developed academically, until I delved into the voluminous research substantiating this notion. There are times when I admit, the logic of adolescent murder and suicide, quite honestly, simply escapes all facet of intellectualization

Helfgott (2015) reported “… an increasing number of documented cases suggesting that actual serial murderers and school shooters have mimicked and/or altered their behavior based on media stories of actual or fictional killers” (p. 51). Researchers found a striking number of school shooters intensively studied Harris and Klebold’s 1999 Colorado mass shooting, hoping to better their efforts, thus gaining a higher degree of fame and glory (Bowman, 2012; Bobo, 2014; Moore, Petrie, Braga, and McLaughlin, 2003; Mongan, 2013; Bryson, 2015; and Glazier, 2015). From his prison cell, after serving approximately 8 years of a life-without-parole sentence
for killing two and injuring one student at Richland High School, Tennessee (November 15, 1995), Jamie Rouse confessed to CBS 48 Hours News Correspondent Maureen Maher the movie Natural Born Killers (1994) greatly influenced him to commit murders. He bragged how he was fascinated by how easy and fun it appeared (Leung, 2004). Furthermore, Michael Carneal in Peducah, Kentucky, Barry Loukaitis in Moses Lake, Washington, and Columbine perpetrators Klybold and Harris were inspired after watching Oliver Stone’s controversial movie Natural Born Killers (1994) to commit Rampage school violence (Helfgott, 2015). On April 9, 2014, Alex Hribal stabbed 20 individuals with an 8 to 10-inch knife. In his manifesto (dated April 6, 204), Alex praised the Columbine High School mass perpetrators – Eric Harris and Dylan Klebold – for their ‘godly efforts’, stating (see Figure 10)

I admire [Eric Harris and Dylan Klebold] greatly because they saw something wrong in the world and moved away the herd of sheep to do something about it,” the document states. “They also possessed three crucial things a person needs in order to become a god: intelligence, ideology, and malice… (Goldstein, 2015).

I remain astonished at the degree of depravity, infantile delusions of grandeur –speaking of wishful notions of becoming a “God”. The classification of his ‘horrific acts of violence’ as art sickens me to nth degree… How could a young person harbor thoughts as vile and disgusting as the likes of this? In many respects, I am left with thoughts clinically similar to the 1970 massacre masterminded by none other than Charles Manson, who’s thought pattern and homicidal symptomatology seems eerily similar. The only difference rests in the notion that Alex Hribal wasn’t interested in recruitment of others. In his extremely narcissistic state, the brunt of Olympian glory he imagines as an honor heralded to him, and him alone… What is the psychosocial etiology for such an unspeakable condition?
Figure 10. Page 1 of Alex Hribal’s manifesto. Adapted from “Franklin Regional stabbings suspect denied bail; Hribal’s manifesto released,” by Andrew Goldstein, October 27, 2015, Pittsburgh Post-Gazette.
The Columbine incident (1999), and news coverage of the event, itself inspired copycats including a school shooting in Toronto, Canada by a 14-year-old diagnosed with conduct disorder and said to be bordering on the threshold of a diagnosis of psychopathy who was fixated on the Columbine Shootings” (Helfgott, 2015, p. 60).

How is it that a violent movie or the reporting of unusually violent or socially revolutionary acts, influence specific individuals to become motivated to commit atrocious acts of mass murder?

Media images may send a would-be offender over the edge or give ideas about how to commit a crime to someone who was planning to commit a crime anyway. Individual, environmental, situational, and media-related factors interact in a unique way to influence whether or not an individual or group of individuals will mimic criminal behavior they see in the media and popular culture (Helfgott, 2015, p. 52).

As shown in Figure 11, Copycat crimes are influenced by five specific biopsychosocial constituents (Helfgott, 2015, p. 52). In reference to the number of RSS episodes that have occurred over the past 5-10 years, the preponderance of data shows a strong correlation between these five influences and the biopsychosocial nature of each RSS.
**Bullying and Aggressive Behavior.** Bullying has become an international problem leading to a public outcry from parents, school administrators/teachers, students, and victims to stop. Bullying is an aggressive/violent form of behavior expressed against another person or certain type: teasing or name-calling; social exclusion; peer sexual harassment. Of interest, clinical neuroscientific investigations found bullying produces overt neurophysiological changes within the brain which presented itself in the form neurological scarring from impaired axonal connections and malformed glial cells, much like those found in children who were physically/sexually abused (Anthes, 2010).

Evans and Chapman (2014) contend bullying behavior is fast becoming a normal part of the school experience for a large percentage of the U.S. youth. Since the Columbine High school shooting in 1999, a national awareness has risen regarding the relationship between the increased rate of school bullying and the emergence of school shootings (Hurford, Lindskog, Cole, Jackson, Thomasson et al., 2010).

As a result of various research findings, the definition of bullying has undergone various changes. Langman (2015) defined bullying as "... a pattern of behavior that includes insults, taunts, harassment (including sexual harassment), stalking, threats, intimidations, or physical assaults".

... at least 54% of the shooters teased, harassed, stalked, threatened, or intimidated others. Thus, it appears school shooters bullied others more than they were victims of bullying. In some cases, shooters were both perpetrators and victims of harassment (Langman, 2015, p. 197).

Recently, the Centers for Disease Control and Prevention (CDC) and the Department of Education (ED) released three new components to their standardized definition of bullying – observed/perceived power imbalance, unwanted aggressive behavior, and repeated instances of aggressive behavior. According to Vivolo-Kantor, Martell, Holland, and Westby (2014), there
exists no “… standardization of bullying measurement [across investigational studies, which] is still needed to provide a better understanding of this problem” (p. 423). Recent evidence showing the relationship between bullying and aggressive behavior is inconclusive. Vossekuil et al., (2002) and Schuster (2009) reported 71% of a group of school shooters confessed to experiences of bullying, physical attacks, and/or frequent threats. The U. S. Secret Service reported 66.3% of the investigated school shooters occurred as a result of continued bullying and harassment (Vossekuil, Fein, Reddy, Borum, & Modzeleski, 2002). Meloy, Hempel, Mohandie, Shiva, and Gray (2001) stated a small percentage of the Rampage school perpetrators were repeatedly bullied in school, but never chose to retaliate in kind. A “… national survey found that 28% of students (aged 12-18) reported being bullied on school property, and an estimated 16% reported being bullied electronically in 2011” (CDC, 2012; Hong, Davis, Sterzing, Yoon, Choi et al., 2014, p. 696).

Our findings also support recent work demonstrating a link between bullying victimization and aggressive behavior. In our study, perpetrators were more likely than victims to have been described as having been bullied by their peers…these data demonstrate the importance of programs designed to help teachers and other school staff recognize and respond to incidents of bullying between students (Anderson, Kaufman, Simon, Barrios, Paulozzi et al., 2001).

Especially disturbing information showed a significant number of bullying episodes of RSS shooters were not communicated to either parents or school officials (Newman, 2004; Hurford, Lindskog, Cole, Jackson, Thomasson et al., 2010). According to Langman (2015), the following findings argued against the various School Shooter myths and various social conventions – false assumptions – which were bantered about in both the literature and school community:

- “Most school shooters were not victims of bullying;
- Only one out of forty-eight (2.08%) shooters, targeted a student who had bullied him;
- More shooters targeted school personnel, than any other category of victim;
- In two out three (66.66%) populations of school shooters, white males were not a majority;
- Most school shooters were not socially isolated loners;
- School shooters are not always middle-class;
- Most school shootings did not occur in urban settings;
- Most school shooters were not on psychiatric medications at time of their attacks” (p. 195-201).

**School Shooter Political Notions.** As a result of several mass school shootings following the Columbine event, a raging debate ensued between religious, political, educational, law enforcement, and of course, the Gun Debate lobbyists – The NRA and the 2\textsuperscript{nd} Amendment. Lobbying/Political pundits presented boisterous arguments that appear to kip up tons of ‘social dirt’, clouding social science and psychological research rooms far and wide. But, in truth, no effective solution(s) or effort(s) moved the solution-needle in any meaningful manner. The reason for this cacophonous standoff relates, without question, to the historical, constitutional, and medical classification of the proper definition/management of the mental Illness and Health. How to limit mentally compromised individuals’ access to guns and firearms is the prevailing question. In light of the national political landscape regarding gun-control laws and our fractured Mental Health system, Kass (2014) said it best – “There are no easy answers” (p. 335).

Although some may consider Rampage School shooting morally insane acts of inhumanity (Lakoff, 2009) – Western, Christian-based sensibilities – other non-Western factions may consider it heroic, rather anti-establishment notions. The idea of extreme revolutionary concepts or terrorism, in America, is clearly unconstitutional, and an outright traitorous act to the United States way of living. Yet and still, the idea has been bantered about and discussed in scientific literature. Nick Turse (2000), Columbia University doctoral candidate within the Department of History, wrote a controversial piece about the Columbine High School shooters, inciting a literary and journalistic debate that emblazoned my previous point regarding revolutionary violence and the educational-political system. Basically, Turse acknowledged
Harris and Klebold acted as revolutionaries against “… the American machine, at the very site where it exerts its most powerful influence (high school) … Approve or disapprove of their methods… but don’t disregard dare disregard these modern radicals as anything less than the latest incarnation of disaffected insurgents waging the ongoing American revolution”. Farber (2000), a professor of History at the University of New Mexico, believed Turse’s comments “…only makes sense in an academic culture in which transgression is by definition political and in which any rage against society can be considered radical”. Garfinckle (2000), a Senior Fellow at the Foreign Policy Research Institute, joined the debate with logical assertions that drove the debate further along the path of intellectual realism:

When one strips away all the breathless defensive prose that decorates most of the piece, one is left not with an argument but an assertion that Eric Harris and Dylan Klebold were ‘lashing out at the arena designed to socialize them’… If revolution for the long haul, or even just ‘for the hell of it’, is the cause for which they fought, why suicide? … the young murderers were not trying to evoke creative thought and moral feeling in others, but were engaging in what appears to be at the same time narcissistic and nihilistic violence (Garfinkle, 2000).

But then, Turse would not be denied… Turse took an immeasurable amount of time to speak to respond to Garfinkle’s shocking assessment and assertions regarding his original article. Turse went so far as to mention that Garfinkle was overly emotional and troubled…

I will reaffirm my assertion that Klebold and Harris acted in a manner that I venture to term radical and that they are heirs to a long tradition of American radicalism that was infused with great life some thirty years ago… All I ask that reader look deep into the cultural psyche which has bred the disaffected youth of the millennial age, and query whether the loosening of norms enabled by Sixties radicalism have contributed in any way to today’s radicalism (Turse, 2000, Rebuttal).

Lankford and Hakim (2011) performed a scientific-based comparative analysis between US school shooters vs. suicide bombers in the Middle East. Not surprisingly, the results found similarities shared between the two groups: 1) critically disturbing childhood experiences; 2)
extreme poverty and criminal exposure; 3) diminished self-esteem; 4) irrational sensation-seeking and/or fame/glory behavior.

**Neuroscience and Education.** Over the past several decades, the scientific community has argued against the successful outcome of those professional educational communities who felt the need to collaborate with psychologists and neuroscience. Despite the cry from those who believed this collaboration was a wasteful effort, an increasing number of neuroscientists and educators have challenged this negative assumption, motivated by the humane desire to “… advance neuroscience learning concepts that directly inform teaching and learning… ultimately to affect how students think about their own learning” (Dubinsky, Roehrig, and Varma, 2013, p. 317). Blakemore, Burnett, and Dahl (2010) reported adolescents utilize decision-making structures found in the rear part of their brain – superior temporal sulcus. Whereas, and in comparison, adults focus specifically on the prefrontal cortex to drive decisions, located in the frontal portion of their brain. This article reported “puberty represents a period of profound transition in terms of drives, emotions, motivations, psychology and social life” (p. 931).

Results of the National Comorbidity Survey Replication study, which entailed in-person household assessments of over 9,000 people representative of the United States population (conducted from February 2001 to April of 2003), have indicated that the peak age of onset for having any mental health disorder is 14 years (Kessler, Berglund, Demler, Merikangas, and Walters, 2005; Paus, Keshayan, and Giedd, 2008, p. 6).

Blakemore (2008) reported the possible relationship between the dysfunctional development and the modulation between face recognition and cognitive processing of associative brain functions.

**Identity Crisis.** As a presenter at a Special Session on Mental Hygiene of the American Public Health Association at the 61st Annual Meeting in Washington, D. C. (October 25, 1932), White (1932) stated Nurture was the fundamental factor determining male adolescent
development and how he interpreted what “… happened to him in his bringing-up …” (p. 207).

In this fashion, it seems appropriate to associate personal experiences with what researchers have identified as the formal basis of adolescent identity. To effectively and systematically assess the constructs of ‘Identity’, Sollberger (2013) recommended neuro-cognitive analysis of both psychological and psychopathological experiences, including cultural and societal values.

Erikson (1968) argued adolescent development is dramatically attached to the need for identity and social approval.

… should a young person feel that the environment tries to deprive him too radically of all the forms of expression which permit him to develop and integrate the next step, he may resist with the wild strength encountered in animals who are suddenly forced to defend their lives. For, indeed, in the social jungle of human existence, there is no feeling of being alive without a sense of identity (Erikson, 1968, p. 130).

Crowne (2007) considered adolescence a stormy stage of development, worthy of considerable discussion. Exemplifying this notion, Erik Erikson’s 5th Stage of Development – Identity vs. Identity Confusion – may lay claim to the underlying cause for what transpired in the mind of the adolescent assailant responsible for the Arapahoe high school shooting: On December 13, 2013, 18-year-old Karl Pierson shot 17-year-old student Claire Davis in the head, fatally injuring her, in a hallway. Pierson then committed suicide by shooting himself. He was looking for a faculty member who had disciplined him (Jauregui, 2013; Almasy, 2013; and Watkins and Ellis, 2013).

Learning and Achievement. Although controversial on many levels, society has placed a premium on educational achievement as the yardstick by which individual success is measured. Researchers contend a confluence of social factors significantly impact educational success: 1) decrease in the rise of income equality; 2) decline in upward social mobility; 3) increasing acknowledgement of education as a positive measure of success in the work force; 4) increased
focus on test scores as a metric of educational success; 5) deterioration of family structure; and 6) increased devaluation of parents in children and their education (Reardon, 2013; Gittins, 2014).

While I accept the proverbial notion that “Learning is the measure of teaching,” (McCown, Driscoll, and Roop, 1996, p. xxiii), is it reasonable to assume all measures of learning are created equally? I am not a supporter of the practice of achievement tests to measure aptitude or learning. In my opinion, these instruments were historically designed from an era with an anti-Social Justice agenda. One of the reasons for my difficulty in accepting specific achievement tests (GRE, MCAT, SAT, LSAT) is that these tests fail to identify and/or predict, consistently, fairly, statistically, which students will actually do well in college or graduate school. What these tests provide are scores measuring a student’s ability to ‘do well, or not’ with test questions. In my opinion, the majority of achievement test scores do not accurately predict a student’s success or failure in a specific academic program or life.

On the one hand, there is the one premise we are all too familiar with – the Nature-Nurture question – that certain students are naturally born with a biological ability (genetic predisposition) to perform well on achievement exams. According to Levine and Levine (2013), “Researchers in Texas concluded that there apparently is a ‘latent trait’ characterized as test-taking ability. It may be that achievement tests are impervious to instruction and that they are not a useful criterion for measuring educational progress” (p. 23). In fact, several years ago, I knew and worked with several physicians who boasted about their ‘ability’ to pass achievements tests – SAT, MCAT, and medical boards – with relatively little preparation, and, on a consistent basis. In contrast, a number of African-American professionals confided in me their repeated challenges to merely achieve a score on the same achievement tests barely above the national
average. When questioned about their family history, it was discovered they overwhelmingly were the first in their family to graduate from college.

On the other hand, a considerable number of disadvantaged minority students fail to perform well in the same academic testing venue. Am I advocating affirmative action programs or a “dummy-down achievement test” to be administered to level the playing field? No. I merely support throwing out achievement tests altogether. Instead, place a greater emphasis on reading and writing compositions, the student’s overall GPA in school, letters of recommendations, and possibly an interview. With that said, and in response to the ‘value’ of the Scholastic Aptitude Test, “…some 800 of the roughly 3,000 four-year colleges and universities in America make SAT or ACT submissions optional” (Westervelt, 2014). At the core of this controversial debate regarding the measure of achievement and/or standardized tests, lies the definition of intelligence as it related to the sum total of what it means to be human. By virtue of the many facets of life, swirling around its base, it’s virtually impossible to capture one entire wording to address it fully. Here is where I grapple with and simultaneously embrace all principles associated with the biopsychosocial model about the genesis and etiology of intelligence. And yet, I find myself the student of the following indisputable logic: “…Intelligence is the sum total of all cognitive processes. It entails planning, coding of information and attention, as well as arousal” (Plucker, 2007).

In terms of achievement, Hiss (2014), a former dean of admissions at Bates College (Lewiston, Maine), states “human intelligence is so multifaceted, so complex, so varied, that no standardized testing system can be expected to capture it” (Westervelt, 2014). Hiss, the author of a multi-year study, *Defining Promise: Optional Standardized Testing Policies in American*
College and University Admissions, examined data from nearly three-dozen ‘test-optional’ U.S. schools (i.e., small liberal arts schools to large public universities) found

… there was virtually no difference in grades and graduation rates between test ‘submitters’ and ‘non-submitters.’ Just 0.05% of a GPA point separated the students who submitted their scores to admissions offices and those who did not. And college graduation rates for “non-submitters” were just 0.6% lower than those students who submitted their test scores (Westervelt, 2014).

When asked about receiving her favorable admission letter from Wake Forest University, one of the schools using the SAT test-optional policy, an African-American student with a 3.7 GPA responded she felt ‘valued… not by a number, but more importantly, my character’.

Bold decisions are necessary to effect education reform. For too long our society have relied on ineffective and outdated educational models that has stalled this institutions progress and future. Moreover, the educational system as a whole must find other effective learning methodologies to identify and explain character and intellectual abilities (Beatty, 1998).
Chapter 3
If a thing exists, it exists in some amount; and if it exists in some amount, it can be measured.
— Edward L. Thorndike (1914)

Research Methodology

Introduction. On April 20, 1999, Dylan Klebold and Eric Harris, etched into the world’s consciousness a horribly record-breaking event – the Columbine High School massacre (Littleton, CO) – that kindles a fiery national debate surrounding the 2nd Amendment, ‘Mental Health and Guns’ (Thompson, 2005; Dulan, 2014; Konnikova, 2014). Moreover, investigative journalists and social scientists (Mongan, 2013), and other interdisciplinary scholars, continue to infuse prevailing RSS literature with confounding RSS information. Flannery, Modzeleski, & Kretschmar (2012) appraised these reports as psychological autopsies: overwhelmingly qualitative in nature, lacking evidence-based methods, and powered by insufficient sample sizes (Verlinden, Hersen, and Thomas, 2000; Langman, 2009a; O’Toole, 2010; McGee and DeBernardo, 1999; Meloy, Hempel, Mohandie, Shiva, and Gray, 2001; Newman, 2004).

Increase in the prevalence and incidence of RSS or mass school shooter prompted many local and federal investigation agencies to utilize innovative Behavioral Science ‘Disruptive Technologies’ that enhances behavioral data gathering approaches. Current scientific and law enforcement records identified numerous RSS cyberspace threats, warnings, and/or manifests were enforced prior to the fatal act of school violence. Taking that critical information into light, computer scientists incorporate specific applications to data mine web postings for specific violent language categorized outside the normal range of effective and acceptable social media communications. Content Analysis is the primary objective of the latest program PCAD 2000 that utilizes quantitative correlational design algorithms to identify patterns attributable to word choice, deviant and/or violent conceptual construction(s), and linguistic tone (Gottschalk and

In tandem with these efforts, the U.S, Congress assembled subject-matter-experts from various divisions of the National Research Council (i.e., National Academy of Sciences, the National Academy of Engineering, and the Institute of Medicine), along with the Department of Education, to address the underlying etiology and risk factors of this emerging phenomena. Because of the multiple factors identified with the number of school shooters included in the investigational study, the extraordinary think tank committee concluded their investigation identifying several observations and/or recommendations:

Because of the complexity of developmental and other factors that produce these behaviors… (Moore, Petrie, Braga, and McLaughlin, 2003, p. 331) … it is virtually impossible to identify the likely offenders in advance; thus, there is no accurate way to develop a profile of students at high risk to commit these kinds of acts (p. 7).

Rampage School Shooters represent an existential, formidable threat. Fatal school violence is characterized by complex, idiosyncratic attributes (American Academy of Child and Adolescent Psychiatry, December 2011; Moore, Petrie, Braga, and McLaughlin, 2003; Smith, 2006; McNiel, Borum, Douglas, Hart, Lyon, Sullivan, & Hemphill, 2002). This study will utilize the BPS to compare and contrast Biopsychosocial variables against ‘Perpetrator factors’ (Mongan, 2013) and a typology (Langman, 2015) cited and evaluated several years earlier. Furthermore, outcome information from this study will “… build knowledge…” (Langley,
Moen, Nolan, Nolan et al., 2009, p. 99) through professional society annual conference dialogues and/or professional presentations, of which I remain an active member:

- American Public Health Association
- American Psychological Association

**Primary Research Claim.** The primary step in understanding Rampage Shootings as an emerging phenomenon begins with a scientific assessment, or appraisal, of biological, psychological, and social constructs of ‘being’ which, invariably, contribute to a displaced and often pathological personhood and/or selfdom. An epidemiological assessment of Retrospective Historical Rampage School assailant cases is a critical step not only in understanding biopsychosocial constructs of ‘being’, but also a significant means in the attainment of a reasonable school safety improvement strategy (Gittins, 2014).


As a theoretical framework, the BPS model triangulates underlying factors (i.e., internal, external, etc.) oftentimes disguised within one’s dynamic lifestyle as embedded relationships vacillating between genetic, social, and behavioral influences. Moreover, research is showing systematic processes and incredibly large documents fueled by fanciful rhetorical policymaker speeches are not realistic in effectively preventing school shooter violence. The BPS affords a high probability as a relevant, scientifically proven risk management approach (Borum, 2000).
Research Design

This study was designed as a correlational, descriptive investigation. A Four-Phase data management process flow procedure, quantitative, non-experimental research design was employed. RSS variables (N=18) were analyzed using: 1) One-Way Analysis of Variance (ANOVA), Chi Square, an independent t-Test, and Standard Multiple Regression (IBM SPSS® Statistics 22 for Windows).

Research Questions: Eighteen RSS variables (i.e., behavioral attributes) were abstracted from the literature. This study is driven by two research questions:

Eighteen RSS variables (i.e., behavioral attributes) were abstracted from the literature. This study is driven by two research questions:

- **Question 1**: Is there an association between
  a) RSS assailants 11-36 years of age (1995-2016) and psychological therapy and/or anxiety/depression medication?
  b) the number of RSS deaths and criteria-based RSS assailants who were 11-36 years of age?

- **Question 2**: Which of the following variables is the best predictor of a Rampage School Shooter?
  a) Age in years;
  b) Gender;
  c) Race;
  d) Attempted Suicide or Successful;
  e) Psychological therapy;
  f) State;
  g) Anti-social Personality Disorder;
  h) Internet;
  i) Bullied;
  i) Schools.

The Biopsychosocial model was utilized to advance the prevailing definition of Rampage School Shooting – perceived or imagined – with respect to 1) Biological; 2) Psychological; 3) Social; and 4) Environmental factors.
Criteria-based Database Information. A Four-phase Data Management Process Flow diagram was utilized to illustrate acquisition/screening of the Historical Retrospective data (i.e., Inclusion/Exclusion) as a potential RSS case. Figure 12 provided a detailed diagram of the RSS Data Management Process Flow (4 Phases).

1) Phase I – Identification of Retrospective Historical RSS Case (Duration: January 2014-December 2014)
   - Initiation of Problem of Practice (PoP) dissertation investigation
   - Rampage School Shooter (RSS) Systematic & Intentional Inquiry
     i. Online RSS databases searches
     ii. Media (National, local newspapers, etc.), books, and various journals (Psychology, Social Science, Clinical Neurology, Clinical Psychiatry, Neuroscience, Statistics, Educational Science, Orthopsychiatry, Criminal Justice, Mental Health, Adolescence, etc.)
     iii. Retrospective U.S. RSS cases. 1995-2015 (N=59)

2) Phase II – Triangulation Methodology: Data Inclusion Criteria (Duration: July 2014-December 2015)
   - Development of Eleven (11) RSS Criteria-based questions

3) Phase III – Data Management Quality (Time frame: September to November 2015)
   - Approval of “Retrospective U.S. RSS cases, 1995-2015 (N=59)”?
   - Approval of RSS Criteria-based inclusion/exclusion questions (11)?
   - Approval of SPSS database variables (18)?
   - On January 1, 2016, the RSS dissertation database was ‘Locked’ to new RSS cases

4) Phase IV – Triangulation Statistical Methodology
   - Approval of Statistical Methodology?
     i. Initiation of SPSS RSS Statistical Analysis
        • Generation of RSS Descriptive Statistics tables and listings
        • Standard Multiple Regression analysis
        • Analysis of Variance (ANOVA)
        • Chi Square Statistics
        • Independent t-Test

If the RSS data agreed with all of the following criterial questions – simply answered in the affirmative – then the RSS case enters into the Rampage school violence database.

Retrospective historical cases were not entered if answered negatively (Phase II, Figure 12):
1) According to the operational definition of a Nontraditional school shooting, does the school violence incident fit the classical definition? The operational definition of a Nontraditional school shooting includes: unrelated to gangs, urban problems, minority or ethnic status, gangland warfare, drugs or armed robbery or extortion criminal activity. Langman (2009a) reported “Rampage school shootings do not include shootings of specific individuals due to a conflict … i.e., rival gang shootings, shootings resulting from conflicts over a drug deal, and so on…” (p. 80).

2) Data validated against the existence of school fatality information from at least three local/nationally distributed newspapers?

3) Age cited? (Null values are not permitted in the statistical analysis).

4) Assailant enrolled in school in which school violence incident occurred?

5) Gender verified?

6) City, state and date reported?

7) Did the student commit homicide and/or suicide?

8) Did the articles cite the number of injuries and/or deaths?

9) If the student did not commit suicide, did the articles state he was arrested?

10) Type of weapon identified/verified during school violent incident?

11) Ever bullied?

12) Did the perpetrator participate in ‘duality’ crime?

13) Any evidence perpetrator participated in psychotherapy or was prescribed medication for psychological behavioral disorder?

Data Triangulation. Twenty years of Rampage School Aggressor data – documented from 1995 to 2015 – derived from triangulated retrospective historical accounts and local/national news media is the primary source of statistical analysis. Historical information is subject to a high degree of scrutiny. How much of the reported event was accurate? Was bias ever considered during the reporting? Was the reporter ever vetted as credible and/or qualified? Because of the original quality of source documents and the vast amount of information collected, Data Triangulation methodology (see Figure 12) was used to substantiate “… evidence of the quality of … [the] data…” (Schreiber and Asner-Self, 2011, p. 118). Therefore, with retrospective accounting of a new emerging phenomenon such as RSS, reliable and valid documentation is of the utmost importance (Schreiber and Asner-Self, 2011). Schreiber and Asner-Self (2011) presented a reasonable discussion arguing: “Validity can also be understood as authenticity” (p. 273).
The criteria-based RSS case database (N=59) used in this Dissertation investigation begins with Anthony Sincino (Date of Record: October 12, 1995) in Blackville, South Carolina, and ends with Faisal Mohammad (Date of Record: November 4, 2015) in Merced, California. Individual RSS database cases were correlated against 18 variables (see Table 2). *SPSS* 22 for Windows was used to “… filter out the noise” (Wheeler, 2000, p. 30).
Figure 12. RSS Data Management Process Flow, 1995-2015.

Investigation Variables

RSS Variables (N=18; See Table 1) were evaluated to determine strength of relationships as a possible risk factor for predicting RSS biopsychosocial factors. RSS information was abstracted from 20-years (1995-2015) of criteria-based retrospective historical cases (N=59). RSS variables were developed and analyzed using SPSS 22 for Windows. Each RSS variable was assigned a name in accordance with the observed behavior of the RSS assailant (Wilkins and the Task Force on Statistical Inference, 1999). Exceptions to this notion included the following variables: State, Race, and Locale.

Age. Refers to the age of the RSS assailant at the time of the incident. Age in Years was coded as a numerical, continuous variable.

Gender. Indicates the sex (i.e., gender) of the RSS assailant. Gender was coded as male = 1, female = 2 (Dichotomous variable).

Race. What is the racial classification of the RSS assailant? Race was coded as African-American = 1, Asian-American = 2, Hispanic = 3, Caucasian = 4, Other = 5 (Nominal variable).

Date. Refers to the recorded date of the RSS incident. Date of RSS incident was coded as a numerical, continuous variable.

Deaths. How many deaths were officially associated with this assailant? Number of Deaths was coded as a numerical, continuous variable.

Injuries. How many injuries were officially associated with this assailant? Number of Injuries was coded as a numerical, continuous variable.

Suicide. Did the RSS assailant commit suicide? Variable was coded as No = 0, Yes = 1 (Dichotomous variable).
Psych. Evidence of psychotherapy (medication or talk) or Mental Health diagnosis? was coded as $No = 0$, $Yes = 1$ (Dichotomous variable).

State. Name of U.S. state was coded as a Nominal variable.

APB (Anti-social personality). RSS assailant associated with antisocial behavior? Variable coded as $No = 0$, $Yes = 1$ (Dichotomous variable).

Bullied. RSS assailant bullied or engaged in bullying? Variable was coded as $No = 0$, $Yes = 1$ (Dichotomous variable).

Gothic. Gothic appearance/clothing? was coded as $No = 0$, $Yes = 1$ (Dichotomous variable).

Internet. Internet Activity/Publication? was coded as $No = 0$, $Yes = 1$ (Dichotomous variable).

Duality. Did the RSS assailant engage in fatal violence at home and then continue same similar activity at school? The variable was coded as $No = 0$, $Yes = 1$ (Dichotomous variable).

School. Type of school was coded as $Elementary = 1$, $Middle = 2$, $High = 3$, $College = 4$, $University = 5$ (Ordinal variable).

Locale. Location of school? Urban or suburban location was coded as a categorical variable.

Weapon. Gun(s) used was coded as $Gun(s) = 1$, $Knife = 2$.

Incarcerated. Was the assailant incarcerated? Variable was coded as $No = 0$, $Yes = 1$ (Dichotomous variable).
Table 1: Dissertation Research Rampage School Shooter (RSS) variables, 1995-2015. Adapted from RSS database (SPSS) under development for partial fulfillment of the requirements for the Ed.D. in the Professional Doctorate in Educational Leadership Program, Department of Education, Duquesne University. Copyright 2016 by Paul Lomax, Doctoral Candidate.

<table>
<thead>
<tr>
<th>RSS Variable</th>
<th>Description</th>
<th>Unit of Measurement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td>Age of Rampage School Shooter (RSS)</td>
<td>Continuous</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td>Male or Female?</td>
<td>Dichotomous</td>
</tr>
<tr>
<td><strong>Race</strong></td>
<td>African-American; Asian-American; Caucasian; Hispanic or other</td>
<td>Nominal</td>
</tr>
<tr>
<td><strong>Date</strong></td>
<td>Date of school fatality</td>
<td>Continuous</td>
</tr>
<tr>
<td><strong>Deaths</strong></td>
<td>Number of documented deaths</td>
<td>Continuous</td>
</tr>
<tr>
<td><strong>Injuries</strong></td>
<td>Number of documented injuries</td>
<td>Continuous</td>
</tr>
<tr>
<td><strong>Suicide</strong></td>
<td>Attempted or successful suicide?</td>
<td>Dichotomous</td>
</tr>
<tr>
<td><strong>Psych</strong></td>
<td>Evidence of psychotherapy (medication or talk) or Mental Health diagnosis?</td>
<td>Dichotomous</td>
</tr>
<tr>
<td><strong>State</strong></td>
<td>State school violence occurred?</td>
<td>Nominal</td>
</tr>
<tr>
<td><strong>APB</strong></td>
<td>Anti-social Personality Disorder mentioned?</td>
<td>Dichotomous</td>
</tr>
<tr>
<td><strong>Bullied</strong></td>
<td>Assailant bullied?</td>
<td>Dichotomous</td>
</tr>
<tr>
<td><strong>Gothic</strong></td>
<td>Gothic attire/clothing?</td>
<td>Dichotomous</td>
</tr>
<tr>
<td><strong>Internet</strong></td>
<td>Internet warning letter or Manifesto published/recorded?</td>
<td>Dichotomous</td>
</tr>
<tr>
<td><strong>Duality</strong></td>
<td>Fatal violence documented at both home and school?</td>
<td>Dichotomous</td>
</tr>
<tr>
<td><strong>School</strong></td>
<td>Elementary, Middle School, High School, College, or University?</td>
<td>Ordinal</td>
</tr>
<tr>
<td><strong>Locale</strong></td>
<td>Urban or Suburban school setting?</td>
<td>Dichotomous</td>
</tr>
<tr>
<td><strong>Weapon</strong></td>
<td>Weapon(s) used: Gun(s) or knife?</td>
<td>Dichotomous</td>
</tr>
<tr>
<td><strong>Incarcerated</strong></td>
<td>Assailant incarcerated?</td>
<td>Dichotomous</td>
</tr>
</tbody>
</table>
Statistical Design Rationale.

Creswell (2009) recommended the institution of a “… rationale for the choice of statistical test and mention the assumptions associated with the statistic (p. 152).

Correlation Rationale. According to Gravetter and Wallnau (2009), “… the correlational design was introduced as a method for examining… relationship between two variables by measuring two different variables for each individual on one group of participants” (p. 520). Correlation analysis affords statisticians/researchers the quantitative benefit of identifying significant relationships between specific variables vs. those which may not demonstrate a relationship worth noting. In other words, when one variable is changed, how does this affect the other? In nature, particularly human cultures teeming with all manner of behaviors, such changes are not readily identified. What are the determinative associations with the complex Rampage School shooter group?

Effect Size Rationale. Creswell (2009) reported Effect Size as “… the strength of the conclusions about group differences or the relationships among variables…” (p. 167). The American Psychological Association’s Task Force on Statistical Inference cautioned investigators to “always present effect sizes for primary outcomes” (Wilkinson & the APA Task Force on Statistical Inference, 1999, p. 599). Reason for this request stems from the need “… to fully understand the importance of … findings … [and the] effect size or strength of relationship” (APA, 2001, p. 25). Coe (2002) reported the following Effect Size equation to use when calculating the difference between two groups (see Figure 13):

Cohen (1988) provided perhaps the most widely known guidelines or “operational definitions” (p. 79) that are more realistic than those above for interpreting the magnitude of correlation coefficients typically found in the behavioral sciences. These guidelines are “offered as a convention … for use when no others suggest themselves” (Cohen, 1988, p. 79). According to Cohen, correlation coefficients in the order of .10 are “small,” those of
.30 are “medium,” and those of .50 are “large” in terms of magnitude of effect sizes (Hemphill, 2003, p. 78).

\[
\text{Effect Size} = \frac{\text{[Mean of experimental group]} - \text{[Mean of control group]}}{\text{Standard Deviation}}
\]

Figure 13. Cohen’s Effect Size Equation.

**One-way ANOVA Rationale.** As it so true for the 1) conceptualization; 2) development; 3) organization; 4) critical appraisal of the literature; and 5) scholarly writing in the development of a Doctoral Dissertation, so too is the following critical point: “Making sense of data is a process” (Wheeler, 2000, p. 16). Of greater importance, it was argued our Educational System has neglected to manage chaos effectively via the development of an effective methodology to process data associated with complex situations (Wheeler, 2000). The One-way ANOVA model assists with the quantitative understanding of both the within- and between-group variability: comparison of means (i.e., \( k \) greater than 2 groups) (Gravetter and Wallnau, 2009; Kuzma, 1998). One-way ANOVA affords the relevant advantage of analyzing sample data to make inferences and predictions about the relative nature or nurture of the general population (Gravetter and Wallnau, 2009), in this study investigating and describing Rampage School Shooter (RSS) phenomena.

Accordingly, this approach was utilized with the understanding that the One-way ANOVA model is not used to compare variances, as the name implies, but rather, to statistically analyze and/or compare differences between RSS means (Gravetter and Wallnau, 2009; Kuzma, 1998). This study focused on the actual level or degree of ‘difference(s)’ between and across RSS variables. Therefore, given the intention and nature of the research question driving this study, use of an ANOVA (one-way, two-way, or three-way) makes perfect sense as a viable
statistical model. Six assumptions were employed to determine the usefulness of and qualification to exercise a One-way ANOVA analysis of RSS variables:

- **Assumption #1:** Your dependent variable should be measured at the continuous or ratio level (i.e., they are continuous).
- **Assumption #2:** Your independent variable should consist of two or more categorical, independent groups. Typically, a one-way ANOVA is used when you have three or more categorical, independent groups, but it can be used for just two groups (but an independent-samples t-test is more commonly used for two groups).
- **Assumption #3:** You should have independence of observations, which means that there is no relationship between the observations in each group or between the groups themselves.
- **Assumption #4:** There should be no significant outliers.
- **Assumption #5:** Your dependent variable should be approximately normally distributed for each category of the independent variable.
- **Assumption #6:** Homogeneity of variances (LAERD, 2013).

**Standard Multiple Regression Rationale.** Several assumptions are associated with an accurate statistical assessment of the relationships between a Dependent Variable and suspected predictors (i.e., independent) variables. Williams, Gómez Grajales, and Kurkiewicz (2013) provided a high-level technical justification for the necessity for statistical congruence with: 1) Multicollinearity; 2) Normal Distribution; and 3) Linearity.

**Chi Square Rationale.** This study will utilize Chi Square (X^2) statistic, unlike the ‘Goodness of Fit Chi Square’ statistic, to determine the existence and/or quantitative degree of ‘association’ between specific RSS variables (i.e., interval/ratio, etc.). Laerd (2013a) defines said procedure as the “… test for independence, also called Pearson's chi-square test or the chi-square test of association” (see Figure 14). In keeping with the rational for the utilization of this
statistical association approach, two assumptions were employed to justify usefulness of and qualification to exercise a Chi Square Independence analysis of RSS variables:

- Assumption #1: Your two variables should be measured at an ordinal or nominal level (i.e., categorical data).

- Assumption #2: Two variables should consist of two or more categorical, independent groups. Example independent variables that meet this criterion include gender (2 groups: Males and Females), ethnicity (e.g., 3 groups: Caucasian, African American and Hispanic), physical activity level (e.g., 4 groups: sedentary, low, moderate and high), profession (e.g., 5 groups: surgeon, doctor, nurse, dentist, therapist), and so forth (LAERD, 2013a).

\[ X^2 = \sum_{i=1}^{n} \frac{(O_i - E_i)^2}{E_i} \]

Figure 14. Chi Square Test for Association Equation.
Chapter 4

Results

On January 1, 2016, the Dissertation RSS Database was locked to entry of new cases.

Fifty-nine criteria-based RSS cases (N=59) were entered into the investigation RSS database.

Age range for all RSS cases: 11-36 years. Highest RSS frequency (>10) was identified with the age groups: 14, 15, and 18. A leveling off appears beginning with age 20-36 years: Mean = 17.32 and Standard Deviation = 4.65 (See figure 15).

Figure 15: RSS Age Distribution, 1995-2016
The Schools variable (N = 59) consisted of five (5) categories: 1) Elementary (n = 1; 1.7%); 2) Middle (n = 11; 18.6%); 3) High (n = 34; 57.6%); 4) Colleges (n = 3; 5.1%), and 5) Universities (n = 10; 16.9%). Representative educational public school educational institutions that experienced horrific rampage school violence (i.e., deaths, injuries). From 1995-2015, High Schools outnumbered all other educational institutions in RSS fatal violence (n=34; 57.6%). This information identifies High Schools as an urgent, high-risk school shooter/RSS institution (See Figure 16).

Figure 16: Public School RSS cases, 1995-2016
Rampage School Shooter (RSS) Categorical Variables Frequency Distribution.

Eleven categorical variables (n=11) were evaluated (See Table 2). Anti-social Personality Behavior (APB) variable was not found to exist predominantly among the RSS group (N=59). Approximately 44 (74.6%) out of 55 (100%) were negative. Four (6.8%) unknowns were recorded. Twenty-one (35.6%) individuals were Bullied and 34 (57.6%) were not. Four (6.8%) unknowns were also recorded. Duality (i.e., Home and School fatalities) variable represented 8 (13.6%) individuals versus 51 (86.4%) negative instances. Gothic Attire/Beliefs variable showed 6 (10.2%) positive cases and 53 (89.8%). Approximately 32 (54.2%) of RSS assailants underwent Incarceration, and 27 (45.8%) RSS individuals failed. The Internet (i.e., Manifesto, etc.) or e-mail (or both) was utilized by 18 (30.5%) RSS assailants to threaten and extend the terror regarding the impending homicide/suicide attack, where 41 (69.5%) did not. Psychological Diagnosis (-es) is vitally critical in assessing RSS potential. In this analysis, 40 (67.8%) individuals underwent psychological treatment, and some were under psychotherapist evaluation (i.e., talk-therapy), and/or prescribed depression, anxiety, and antipsychotic medications. Suicide is a longstanding and rather unfortunate problem. History has reported many instances where suicide occurred as a standalone psychosocial syndrome. The tie that binds RSS with suicide is most disturbing, and realistically prevalent. Approximately, 36 (61.0%) of the RSS in my study (N=59) committed unspeakable homicides, followed by suicide.
Table 2: Descriptive Statistics: RSS Categorical Variables (n = 11)

<table>
<thead>
<tr>
<th>RSS Variable (1995-2015)</th>
<th>n (%)</th>
<th>Yes (%)</th>
<th>No (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antisocial Personality Behavior (APB)</td>
<td>55 (93.22)</td>
<td>11 (18.6%)</td>
<td>44 (74.6%)</td>
</tr>
<tr>
<td>Unknown:</td>
<td>4 (6.8%)</td>
<td>---------</td>
<td>--------</td>
</tr>
<tr>
<td>Bullied</td>
<td>55 (93.22)</td>
<td>21 (35.6%)</td>
<td>34 (57.6%)</td>
</tr>
<tr>
<td>Unknown:</td>
<td>4 (6.8%)</td>
<td>---------</td>
<td>--------</td>
</tr>
<tr>
<td>Duality (Home and School)</td>
<td>8 (13.6%)</td>
<td>51 (86.4%)</td>
<td></td>
</tr>
<tr>
<td>Gender</td>
<td>58 (98.3%)</td>
<td>---------</td>
<td>--------</td>
</tr>
<tr>
<td>1) Male:</td>
<td>58 (98.3%)</td>
<td>---------</td>
<td>--------</td>
</tr>
<tr>
<td>2) Female:</td>
<td>1 (1.7%)</td>
<td>---------</td>
<td>--------</td>
</tr>
<tr>
<td>Gothic Attire/Belief(s)</td>
<td>6 (10.2%)</td>
<td>53 (89.8%)</td>
<td></td>
</tr>
<tr>
<td>Incarceration</td>
<td>32 (54.2%)</td>
<td>27 (45.8%)</td>
<td></td>
</tr>
<tr>
<td>Internet Manifesto</td>
<td>18 (30.5%)</td>
<td>41 (69.5%)</td>
<td></td>
</tr>
<tr>
<td>Locale</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1) Suburban</td>
<td>21 (35.6%)</td>
<td>34 (57.6%)</td>
<td></td>
</tr>
<tr>
<td>2) Urban</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychological Diagnosis (-es)</td>
<td>19 (32.2%)</td>
<td>40 (67.8%)</td>
<td></td>
</tr>
<tr>
<td>Suicide</td>
<td>23 (39.0%)</td>
<td>36 (61.0%)</td>
<td></td>
</tr>
<tr>
<td>Weapon</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1) Gun(s)</td>
<td>57 (96.6%)</td>
<td>---------</td>
<td>--------</td>
</tr>
<tr>
<td>2) Knife</td>
<td>2 (3.4%)</td>
<td>---------</td>
<td>--------</td>
</tr>
</tbody>
</table>

Several Non-categorical/continuous variables (n=3) also underwent evaluation (See Table 2a).

Race variable was divided into two groups: Group 1 (Caucasians) = 46 (78.0%) and Groups 2 (Others) = 13 (22.0%). Five Schools were listed within this variable: Elementary = 1(1.7%); Middle 11 (18.6%), High = 34 (57.6%); College = 3 (5.1%); and University = 10 (16.9%).
top three states showing the highest prevalence of RSS events include: 1) California = 7 (11.9%); 2) Pennsylvania = 5 (8.55); and 3) Oregon = 4 (6.8%).

Table 2a: Descriptive Statistics: RSS Non-Categorical/Continuous Variables (n = 3)

<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Race</td>
</tr>
<tr>
<td>1) Caucasian: 46 (78.0%)</td>
</tr>
<tr>
<td>2) Other: 13 (22.0%)</td>
</tr>
<tr>
<td>• African-American</td>
</tr>
<tr>
<td>• Asian-American</td>
</tr>
<tr>
<td>• Hispanic</td>
</tr>
<tr>
<td>• Other</td>
</tr>
<tr>
<td>Schools:</td>
</tr>
<tr>
<td>1) Elementary: 1 (1.7%)</td>
</tr>
<tr>
<td>2) Middle: 11 (18.6%)</td>
</tr>
<tr>
<td>3) High: <strong>34 (57.6%)</strong></td>
</tr>
<tr>
<td>4) College: 3 (5.1%)</td>
</tr>
<tr>
<td>5) University: 10 (16.9%)</td>
</tr>
<tr>
<td>State</td>
</tr>
<tr>
<td>1) California: 7 (11.9%)</td>
</tr>
<tr>
<td>2) <strong>Pennsylvania: 5 (8.5%)</strong></td>
</tr>
<tr>
<td>3) Oregon: 4 (6.8%)</td>
</tr>
</tbody>
</table>

Rampage School Shooter (RSS) Continuous Variables Frequency Distribution.

Several RSS continuous variables (n=3) were evaluated (See Table 3).

- Age variable was divided into two cohorts: Group 1) 47 (79.7%) RSS individuals 11-18 years; Group 2) 12 (20.3%) RSS individuals 19-36 years. Mean = 17.32, SD = 4.65, Variance = 21.6, and Range = 25 years.
- Deaths included Mean = 3.03, SD = 5.71, Variance = 32.65, and Sum total = 179.
- Injuries included Mean = 4.14, SD = 5.57, Variance = 31.05, and Sum total = 244.
Table 3: *Descriptive Statistics: RSS Continuous Variables* (n = 3)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>17.32</td>
<td>4.65</td>
<td>21.60</td>
<td>---</td>
<td>25</td>
</tr>
<tr>
<td>1) 11-18 years: 47 (79.7%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2) 19-36 years: 12 (20.3%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deaths</td>
<td>3.03</td>
<td>5.71</td>
<td>32.65</td>
<td>179</td>
<td>---</td>
</tr>
<tr>
<td>Injuries</td>
<td>4.14</td>
<td>5.57</td>
<td>31.05</td>
<td>244</td>
<td>---</td>
</tr>
</tbody>
</table>

**Research Question 1) a.** Is there a significant association between criteria-based group of RSS assailants 11-36 years of age (1995-2016) and psychological therapy and/or anxiety/depression medication?

An ‘Independent’ Chi-Square analysis ($X^2$) was used to explore the relationship between RSS assailants who underwent psychological therapy and/or were prescribed anxiety/depression medication (Dependent Variable: Psych) with respect to Age (Independent Variable: Age in Years). In order to accommodate proposed Chi Square assumptions regarding ‘continuous variable test of independence and/or association’, data identified with the Independent variable (IV) Age was collapsed into two distinct groups: 1) 11-18 years of age; 2) 19-36 years of age (See Table 3). The Chi Square analysis was found to be statistically significant, $X^2(1, N = 59) = 12.637, p < .01$. The results support previous investigations alleging adolescents and youths are at-risk for several forms of mental disorders (Paus, Keshavan, and Giedd, 2008; Giedd, Keshavan, and Paus, 2008). However, it remains unclear as to which gender or perhaps both remain at-risk for psychological disorders as a function of stressful life events coupled with sensitive biological resilience/inconsistent social support system.
As shown in Table 4, the minimum expected value = 3.86, whereby the actual Pearson Chi Square value = 12.637, was accommodated. Additionally, and perhaps of greater importance, the strength of association between Age and Psychological Therapy/Medication(s) is significantly high \( r(59) = .463, p < .01 \), two-tailed (See Table 4). A Chi Square 2x2 Contingency Table Analysis of Age of Years * Psychological Therapy and/or Drugs identified the following frequencies and percentages (See table 5).

**Table 4: Research Question 1) a: RSS Chi-Square Tests**

<table>
<thead>
<tr>
<th>Test</th>
<th>Value</th>
<th>df</th>
<th>Asymp. Sig. (2-sided)</th>
<th>Exact Sig. (2-sided)</th>
<th>Exact Sig. (1-sided)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson Chi-Square</td>
<td>12.637*</td>
<td>1</td>
<td>.000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Continuity Correction(^b)</td>
<td>10.296</td>
<td>1</td>
<td>.001</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Likelihood Ratio</td>
<td>12.000</td>
<td>1</td>
<td>.001</td>
<td></td>
<td>.001</td>
</tr>
<tr>
<td>Fisher's Exact Test</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>.001</td>
</tr>
<tr>
<td>Linear-by-Linear Association</td>
<td>12.423</td>
<td>1</td>
<td>.000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>N of Valid Cases</td>
<td>59</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. 1 cells (25.0%) have expected count less than 5. The minimum expected count is 3.86.

b. Computed only for a 2x2 table
Table 5: Chi Square 2x2 Cross Tabulations Table of Age of Years * Psychological Therapy and/or Drugs

<table>
<thead>
<tr>
<th>Age in years 11-18 years of Age</th>
<th>Psychological therapy and/or drugs?</th>
<th>No</th>
<th>Yes</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Count</td>
<td>37</td>
<td>10</td>
<td>47</td>
</tr>
<tr>
<td></td>
<td>Expected Count</td>
<td>31.9</td>
<td>15.1</td>
<td>47.0</td>
</tr>
<tr>
<td></td>
<td>% within Age in years</td>
<td>78.7%</td>
<td>21.3%</td>
<td>100.0%</td>
</tr>
<tr>
<td></td>
<td>% within Psychological therapy and/or drugs?</td>
<td>92.5%</td>
<td>52.6%</td>
<td>79.7%</td>
</tr>
<tr>
<td></td>
<td>% of Total</td>
<td>62.7%</td>
<td>16.9%</td>
<td>79.7%</td>
</tr>
<tr>
<td></td>
<td>Residual</td>
<td>5.1</td>
<td>-5.1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Std. Residual</td>
<td>.9</td>
<td>-1.3</td>
<td></td>
</tr>
<tr>
<td>19-36 years of age</td>
<td>Count</td>
<td>3</td>
<td>9</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>Expected Count</td>
<td>8.1</td>
<td>3.9</td>
<td>12.0</td>
</tr>
<tr>
<td></td>
<td>% within Age in years</td>
<td>25.0%</td>
<td>75.0%</td>
<td>100.0%</td>
</tr>
<tr>
<td></td>
<td>% within Psychological therapy and/or drugs?</td>
<td>7.5%</td>
<td>47.4%</td>
<td>20.3%</td>
</tr>
<tr>
<td></td>
<td>% of Total</td>
<td>5.1%</td>
<td>15.3%</td>
<td>20.3%</td>
</tr>
<tr>
<td></td>
<td>Residual</td>
<td>-5.1</td>
<td>5.1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Std. Residual</td>
<td>-1.8</td>
<td>2.6</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>Count</td>
<td>40</td>
<td>19</td>
<td>59</td>
</tr>
<tr>
<td></td>
<td>Expected Count</td>
<td>40.0</td>
<td>19.0</td>
<td>59.0</td>
</tr>
<tr>
<td></td>
<td>% within Age in years</td>
<td>67.8%</td>
<td>32.2%</td>
<td>100.0%</td>
</tr>
<tr>
<td></td>
<td>% within Psychological therapy and/or drugs?</td>
<td>100.0%</td>
<td>100.0%</td>
<td>100.0%</td>
</tr>
<tr>
<td></td>
<td>% of Total</td>
<td>67.8%</td>
<td>32.2%</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

**Pearson Correlation.** Ten RSS predictor variables underwent a Pearson Correlation analysis (2-tailed Significance) to determine strength of relationships (See Table 6).

- Number of Injuries correlated positively with the following RSS predictor variables: 1) Number of Deaths ($r = .35; p < .01$), 2) Psychological Therapy ($r = .38; p < .01$), 3)
Schools ($r = .26; p < .05$). However, Suicide ($r = .07; p = .58$), Race ($r = .03; p = .81$), Anti-social Behavior ($r = .04; p = .78$), Bullied/Bullying ($r = -.06; p = .63$), and Internet Activity ($r = .15; p = .83$) showed no significant association with Number of Injuries.

- A noticeable degree of relationship strength was observed between Number of Deaths and the remaining RSS predictor variables: 1) Age in Years ($r = .46; p < .01$), 2) Suicide ($r = .38; p < .01$), 3) Number of Injuries ($r = .35; p < .01$), 4) Psychological Therapy ($r = .33; p < .01$), and 5) Schools ($r = .23; p < .05$). Anti-social behavior ($r = .09; p = .49$) and Internet Activity ($r = .01; p = .95$) showed the lowest degree of association with Number of Deaths.

- Age in Years correlated rather well with: 1) Schools ($r = -.59; p < .01$), 2) Number of Deaths ($r = .46; p < .01$), 3) Psychological Therapy ($r = .46; p < .01$), 4) Bullied/Bullying ($r = .40; p < .01$), and 5) Race ($r = .24; p < .05$).

- A significant degree of positive correlation was shown between Psychological Therapy and 1) Age in Years ($r = .39; p < .01$), 2) Number of Deaths ($r = .33; p < .01$), 3) Number of Injuries ($r = .38; p < .01$), 4) Internet Activity ($r = .25; p < .05$), and 5) Schools ($r = .21; p < .05$). No significant relation and/or association was observed with the following predictor variables – Suicide, race, Anti-social Behavior, Bullied/Bullying. Surprisingly, Suicide ($r = -.10; p = .21$) showed the lowest degree of relationship with Psychological Therapy.

- Schools correlated significantly with 1) Age in Years ($r = -.59; p < .01$), 2) Bullied/Bullying ($r = .46; p < .01$), 3) Number of Injuries ($r = .26; p < .01$), 4) Number of Deaths ($r = -.23; p < .05$), and 5) Psychological Therapy ($r = -.21; p < .05$). An exceptionally low degree of relationship was found between Schools and Suicide ($r = -.09; p = .25$).

- Of particular note, Suicide showed a positive correlation with 1) Number of Deaths ($r = .38; p < .01$), and 2) Bullying ($r = -.30; p < .05$). Anti-social Behavior ($r = -.02; p = .43$) and Number of Injuries ($r = .07; p = .58$) were greatly disassociated with Suicide.

- Two predictor variables showed significant correlation with Race: 1) Internet Activity ($r = .45; p < .01$) and 2) Age in Years ($r = .24; p < .05$). Anti-social Behavior ($r = -.01; p = .42$), Bullied/Bullying ($r = -.02; p = .42$), Number of Injuries ($r = .03; p = .81$) demonstrated the greatest degree of insignificant association with Race.
- Anti-social Behavior correlated rather well with Bullying ($r = .53; p < .01$). No relationship was observed between the remaining nine predictor variables.
- Bullied/Bullying identified significantly with: 1) Anti-social Behavior ($r = .53; p < .01$), 2) Schools ($r = .46; p < .01$), 3) Age in Years ($r = -.40; p < .01$); and 4) Suicide ($r = -.30; p < .05$).
- A significant association was shown between Internet Activity and: 1) Race ($r = .45; p < .01$) and 2) Psychological Therapy ($r = .25; p < .05$). Number of Deaths ($r = .01; p = .48$), Bullied/Bullying ($r = .01; p = .47$), Age in Years ($r = .03; p = .41$), and Schools ($r = .05; p = .37$) did not significantly relate with Internet Activity.

By virtue of the aforementioned quantitative correlates listed in the RSS Pearson Correlation table (See Table 6), Age in Years, Number of Deaths, Number of Injuries, and surprisingly, Bullied/Bullying, were identified as exceptionally strong associates with other RSS predictor variables. Therefore, Number of Deaths, Psychological Therapy, Age in Years, and Bullied/Bullying showed the strongest correlations with other RSS predictor variables.

**Table 6: RSS Predictor Variables Correlation Matrix, 1995-2016**

<table>
<thead>
<tr>
<th>RSS Pearson Correlation</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.) Number of Injuries identified</td>
<td><strong>1.00</strong></td>
<td>.35**</td>
<td>.19</td>
<td>.38**</td>
<td>.26*</td>
<td>.07</td>
<td>.03</td>
<td>.04</td>
<td>-.06</td>
<td>.15</td>
</tr>
<tr>
<td>2.) Number of Deaths identified</td>
<td>.35**</td>
<td><strong>1.00</strong></td>
<td>.46**</td>
<td>.33**</td>
<td>-.23*</td>
<td>.38**</td>
<td>.21</td>
<td>.09</td>
<td>-.16</td>
<td>.01</td>
</tr>
<tr>
<td>3.) Age in Years</td>
<td>.19</td>
<td>.46**</td>
<td><strong>1.00</strong></td>
<td>.46**</td>
<td>-.59***</td>
<td>.20</td>
<td>.24*</td>
<td>-.06</td>
<td>-.40**</td>
<td>.03</td>
</tr>
<tr>
<td>4.) Psychological Therapy</td>
<td>.38**</td>
<td>.33**</td>
<td>.39**</td>
<td><strong>1.00</strong></td>
<td>-.21*</td>
<td>-.10</td>
<td>.16</td>
<td>-.13</td>
<td>-.20</td>
<td>.25*</td>
</tr>
<tr>
<td>5.) Schools</td>
<td>.26*</td>
<td>-.23*</td>
<td>-.59**</td>
<td>-.21*</td>
<td><strong>1.00</strong></td>
<td>-.09</td>
<td>-.12</td>
<td>.18</td>
<td>.46**</td>
<td>.45</td>
</tr>
<tr>
<td>6.) Attempted/Successful Suicide</td>
<td>.07</td>
<td>.38**</td>
<td>.20</td>
<td>-.10</td>
<td>-.09</td>
<td><strong>1.00</strong></td>
<td>.16</td>
<td>-.02</td>
<td>-.30*</td>
<td>.15</td>
</tr>
<tr>
<td>7.) Race</td>
<td>.03</td>
<td>.21</td>
<td>.24*</td>
<td>.16</td>
<td>-.12</td>
<td>.16</td>
<td><strong>1.00</strong></td>
<td>-.01</td>
<td>-.02</td>
<td>.45**</td>
</tr>
<tr>
<td>8.) Anti-social Behavior (APB)</td>
<td>.04</td>
<td>.09</td>
<td>-.06</td>
<td>-.13</td>
<td>.18</td>
<td>-.02</td>
<td>-.01</td>
<td><strong>1.00</strong></td>
<td>.53**</td>
<td>.119</td>
</tr>
<tr>
<td>9.) Bullied/Bullying</td>
<td>-.06</td>
<td>-.16</td>
<td>-.40**</td>
<td>-.20</td>
<td>.46**</td>
<td>-.30*</td>
<td>-.26</td>
<td>.53**</td>
<td><strong>1.00</strong></td>
<td>.01</td>
</tr>
<tr>
<td>10.) Internet Activity</td>
<td>.15</td>
<td>.01</td>
<td>.03</td>
<td>.25*</td>
<td>.05</td>
<td>.15</td>
<td>.45**</td>
<td>.14</td>
<td>.01</td>
<td><strong>1.00</strong></td>
</tr>
</tbody>
</table>

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

*. Correlation is Significant at the 0.05 level (2-tailed)
**Research Question 1** b. Does Age of the RSS assailant influence the number of RSS deaths (Dependent Variable)?

An independent samples t-Test was performed to compare RSS Equality of Means between two predictors. Age in Years (Independent variable) and Number of Deaths (Dependent variable) predictors were analyzed. RSS Age in Years variable was collapsed into two distinct groups: 1) 11-18 years of age (M = 1.70, SD = 2.03) and 2) 19 - 36 years of age (M = 8.25, SD = 10.85). A significant difference was observed between the two groups, particularly with respect to the small data set (N = 12) showing the greatest Mean. (See Table 7). The analysis showed \( t(57) = -2.09, p = .06 \), two-tailed with 11-18 years of age (M = 1.70, SD = 2.03) and 19-36 years of age (M = 8.25, SD = 10.85). The independent t-Test indicates a statistically significant difference between respective RSS groups. The magnitude of the differences in the means (mean difference = -6.55, 95% CI: -13.46 to .366) produced a medium effect size (eta squared = .07) (Cohen, 1988).

**Table 7:** Age in Years * Number of Deaths Group Statistics

<table>
<thead>
<tr>
<th>Number of deaths identified</th>
<th>Age in years</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Std. Error Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>11-18 years of Age</td>
<td>47</td>
<td>1.70</td>
<td>2.031</td>
<td>.296</td>
<td></td>
</tr>
<tr>
<td>19-36 years of age</td>
<td>12</td>
<td>8.25</td>
<td>10.847</td>
<td>3.131</td>
<td></td>
</tr>
</tbody>
</table>

**Research Question 2:** Which of the following eight variables is the best predictor of a Rampage School Shooter (RSS): 1) Age in years; 2) Psychological therapy; 3) Schools; 4) Attempted Suicide or Successful; 5) Race; 6) APB; 7) Bullied; or 8) Internet Activity?

A Standard Multiple Regression (SMR) was performed to address this research question. Table 8 shows the results of this SMR analysis. With respect to the aforementioned research question, Number of deaths was used as the Dependent variable (DV), and the Independent
Variables (IV) included eight RSS variables: 1) Age in years; 2) Psychological therapy; 3) Schools; 4) Attempted Suicide or Successful; 5) Race; 6) APB; 7) Bullied; and 8) Internet. Of particular note, and to comply with the SMR rule for IV’s, Schools variable was converted from a continuous to a dichotomous variable, whereby Group 0 = (Elementary, Middle, College, and University) and Group 1 = (High School). The following dichotomous variables were also excluded from the SMR analysis:

- Gender
- Gothic
- Locale
- Weapon
- State
- Incarcerated
- Duality

With regard to the associated meaning accorded to a SMR approach, eight RSS IVs were analyzed both as a group, and under simultaneous conditions. SMR assumption requirements were achieved:

- Collinearity: Tolerance values were less than .10, indicating the presence of multicollinearity, and Variance Inflation Factor (VIF) values were below 10, also indicating the presence of multicollinearity (diagram provided during next review cycle…)
- Outliers, normality and linearity: A near normal P-P Plot of Regression Standardized Residual Chart was shown (See Appendix D)
- Scatterplot: The majority of the residuals were close to a rectangle distribution and centered; while the majority of the standardized residuals resided within the required not more than 3.3 or less than -3.3 boundary, one residual outlier was indicated (Tabachnick and Fidell, 2007) (See Appendix E).

Eight RSS predictors were entered into the SMR equation and analyzed simultaneously (See Table 8). The results showed approximately 40.7% of variance (.407 x 100%) accounted for and/or explained by respective predictors (i.e., Independent Variables) in this SMR model. Said differently, if you know specific information regarding a suspected RSS individual – age,
psychological history, type of school attended, potential for suicide ideation, racial identity, anti-social behavior, bullied, and internet activity – then there is a 40.7% probability that person will commit RSS acts (Higgins, 2006).

Using Number of Deaths as the DV, the best predictor of a Rampage School Shooter, as evidenced in Table 8, is Attempted/Successful Suicide ($\beta = .393, p < .01$) variable, followed by Psychological Therapy ($\beta = .337, p < .01$), then Age in Years ($\beta = .217, p = .19$). Of particular note, the type of school attended by RSS assailants was not as significant as originally suggested. In fact, this predictor variable was located next to the lowest Standardized Coefficient score ($\beta = -.007, p = .96$) out of the entire subgroup of RSS predictor variables. Internet Activity/Publication showed the lowest Standardized Coefficient score ($\beta = -.230, p = .09$).

Eight IVs explained 40.7% of the variance (.407 x 100%) relative to RSS Number of Deaths: $F (8, 50) = 4.29, p < .001$ (See Table 9). Subsequently, statistically significance was determined by all eight RSS predictor variables, where the predictor variable Attempted Suicide/Successful was found with the higher Beta value ($\beta = .39, p < .01$), followed by Psychological Therapy ($\beta = .33, p < .05$), and then Age in Years ($\beta = .21, p = .19$).

**Pearson Correlation.** Eleven RSS predictor variables underwent a Pearson Correlation analysis (1-tailed Significance) to determine strength of relationships.

- Age in Years correlated well with: 1) Number of Deaths ($r = .46; p < .01$), and 2) Psychological Therapy ($r = .46; p < .01$).
- Race correlated positively with the following RSS predictor variable: Internet Activity ($r = .45; p < .01$).
- Schools correlated positively with Bullied/Bullying ($r = .458; p < .01$).
- Anti-social Behavior correlated significantly with Bullied/Bullying ($r = .535; p < .01$).
**Transformed RSS Variables: SMR Analysis.** In comparison to the previous RSS SMR analysis (N=8), eleven RSS predictors were entered into the SMR equation (including 4 transformed RSS predictor variables) and analyzed simultaneously (See Table 8a). The results showed approximately 50.8% of variance (.508 x 100%) accounted for and/or explained by respective predictors (i.e., Independent Variables) in this SMR model. Said differently, if you know specific information regarding a suspected RSS individual – age, psychological history, type of school attended, potential for suicide ideation, racial identity, anti-social behavior, bullied, and internet activity, Age_trans, Death_trans, Injuries_trans, and Bullied_trans – then there is a 50.8% probability that this individual will commit RSS acts of violence (Higgins, 2006). This recently transformed SMR information showed a 10% increase in the probability of RSS prevalence.
Table 8: Standard Multiple Regression: Number of Deaths (Dependent Variable) using Eight RSS Predictors (Independent Variables)

<table>
<thead>
<tr>
<th>RSS Predictors (n = 8)</th>
<th>$R^2$</th>
<th>$\beta$</th>
<th>$B$</th>
<th>$SE$</th>
<th>CI 95% (B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Model</td>
<td>.407</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age in Years</td>
<td></td>
<td>.21</td>
<td>3.06</td>
<td>2.30</td>
<td>-1.55 / 7.68</td>
</tr>
<tr>
<td>Schools*</td>
<td></td>
<td>-.01</td>
<td>-.08</td>
<td>1.65</td>
<td>-3.39 / 3.28</td>
</tr>
<tr>
<td>Psychological Therapy</td>
<td></td>
<td>.33*</td>
<td>4.09</td>
<td>1.65</td>
<td>.77 / 7.40</td>
</tr>
<tr>
<td>Attempted Suicide/Successful</td>
<td></td>
<td>.39**</td>
<td>4.57</td>
<td>1.43</td>
<td>1.70 / 7.45</td>
</tr>
<tr>
<td>Race</td>
<td></td>
<td>.14</td>
<td>1.93</td>
<td>1.76</td>
<td>-1.60 / 5.47</td>
</tr>
<tr>
<td>Anti-social Behavior (APB)</td>
<td></td>
<td>.18</td>
<td>1.75</td>
<td>1.31</td>
<td>-.88 / 4.39</td>
</tr>
<tr>
<td>Bullied or Bullying</td>
<td></td>
<td>.01</td>
<td>.14</td>
<td>1.44</td>
<td>-2.75 / 3.03</td>
</tr>
<tr>
<td>Internet Activity</td>
<td></td>
<td>-.23</td>
<td>-2.83</td>
<td>1.63</td>
<td>-6.10 / .45</td>
</tr>
</tbody>
</table>

Note. Statistical significance: * p < .05; ** p < .01; *** p < .001
$R^2$ = amount of variance explained by IVs
$B$ = Unstandardized coefficient
$\beta$ = Standard coefficient
$SE$ = Standard Error
CI/B = Confidence Interval (Lower Bound/Upper Bound)
*: Group 0 = (Elementary, Middle, College, and University) and Group 1 = (High School)
### Table 8a: Standard Multiple Regression: Number of Deaths (Dependent Variable) using Eleven ‘Transformed’ RSS Predictors (Independent Variables)

<table>
<thead>
<tr>
<th>RSS Predictors (n = 11)</th>
<th>$R^2$</th>
<th>$\beta$</th>
<th>$B$</th>
<th>$SE$</th>
<th>CI 95% (B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Model</td>
<td>.508</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Schools</td>
<td></td>
<td>.01</td>
<td>.13</td>
<td>1.56</td>
<td>-3.09 / 3.27</td>
</tr>
<tr>
<td>Psychological Therapy</td>
<td></td>
<td>.21</td>
<td>2.50</td>
<td>1.65</td>
<td>-.78 / 5.84</td>
</tr>
<tr>
<td>Attempted Suicide/Successful</td>
<td></td>
<td>.27*</td>
<td>3.13</td>
<td>1.54</td>
<td>.03 / 6.23</td>
</tr>
<tr>
<td>Race</td>
<td></td>
<td>.14</td>
<td>1.95</td>
<td>1.69</td>
<td>-1.46 / 5.35</td>
</tr>
<tr>
<td>Anti-social Behavior (APB)</td>
<td></td>
<td>2.70</td>
<td>.28</td>
<td>1.69</td>
<td>-.88 / 4.39</td>
</tr>
<tr>
<td>Bullied or Bullying</td>
<td></td>
<td>.28</td>
<td>2.69</td>
<td>6.28</td>
<td>-.71 / 6.10</td>
</tr>
<tr>
<td>Internet Activity</td>
<td></td>
<td>-.26</td>
<td>-3.15</td>
<td>1.59</td>
<td>-6.34 / .03</td>
</tr>
<tr>
<td>Age_trans</td>
<td></td>
<td>-.19</td>
<td>-16.29</td>
<td>13.50</td>
<td>-43.4 / 10.88</td>
</tr>
<tr>
<td>Deaths_trans</td>
<td></td>
<td>-.24</td>
<td>-4.17</td>
<td>2.36</td>
<td>-8.92 / .57</td>
</tr>
<tr>
<td>Injuries_trans</td>
<td></td>
<td>-.17</td>
<td>-2.79</td>
<td>1.93</td>
<td>-6.67 / 1.1</td>
</tr>
<tr>
<td>Bullied_trans</td>
<td></td>
<td>-.56</td>
<td>-12.01</td>
<td>13.49</td>
<td>-39.14 / 15.11</td>
</tr>
</tbody>
</table>

Note. Statistical significance: * $p < .05$; ** $p < .01$; *** $p < .001$

$R^2$ = amount of variance explained by IVs

$B$ = Unstandardized coefficient

$\beta$ = Standard coefficient

$SE$ = Standard Error

CI/B = Confidence Interval (Lower Bound/Upper Bound)

Using Number of Deaths as the DV, as evidenced from Table 8a, the best predictor of a Rampage School Shooter is Attempted Suicide/Successful indicated the higher Beta value ($\beta = .27$, $p < .05$), followed by Ani-social Behavior ($\beta = .28$, $p = .19$), then Psychological Therapy ($\beta = .20$, $p = .13$). Of particular note, the type of school attended by RSS assailants was not as significant as originally suggested. In fact, this predictor variable was the lowest Standardized
Coefficient score ($\beta = .01, p = .93$) out of the entire subgroup of RSS predictor variables. Internet Activity/Publication the second highest Standardized Coefficient score ($\beta = -.25, p = .052$).

Eleven IVs explained 71.3% of the variance (0.713 x 100%) relative to RSS Number of Deaths: $F (11, 47) = 4.42, p < .001$. Subsequently, statistically significance was determined by all eleven RSS predictor variables, whereby Attempted Suicide/Suicidal indicated the higher Beta value ($\beta = .27, p < .05$), followed by Ani-social Behavior ($\beta = .28, p = .19$), then Psychological Therapy ($\beta = .20, p = .13$).
Chapter 5

The hardest thing to explain is the glaringly evident which everybody had decided not to see.

― Ayn Rand

Discussion


The purpose of this study was to assess critical associations and relationships between specific criteria-based RSS predictor variables (N=18) – via Pearson correlation, ANOVA, Standard Multiple Regression, Chi Square, and t-Test analyses. Findings in this study boldly go where few investigators have trekked, asking, quite simply from a biopsychosocial perspective: 1) Are ‘Rampage School Shooters’ products of their individual environment? And, 2) Are we born to kill? Unquestionably, these are very difficult, but absolutely necessary, questions… This
study utilized criteria-based questions to determine which RSS cases should be included in the investigational database (see Figure 12). In truth, and by virtue of the quality and quantity of school crimes witnessed month-over-month, year-after-year, these are difficult times… And yet, what we fear most as a national population, has come home to roost – increased prevalence of RSS incidences as a fatal New Normal. Somewhere along the way, either from the home, the school system, or deeply imbedded within our constitution, far and wide, ‘psychological health’ and well-being underwent severe neglect.

Perhaps the greatest observation garnered from this deeply engaging and highly enthralling biopsychosocial investigation, is the notion that a meaningful understanding of a complex, emerging phenomenon simply from journalistic and/or psychological autopsies is an inadequate and unscientific approach. In order to fully appreciate the nature and Nurture of critical RSS factors, root causes, or psychosocial constructs, Scholar Practitioners need to “…dig deeper…” (Dr. Connie Moss). In other words, scientific methodological deconstruction of school shooter research, proposed notions, clinical findings, and Rampage School Shooter arguments are warranted for a Scholar Practitioner comprehension of this postmodern, biopsychosocial problem.

Appropriate questions arise regarding the validity of Retrospective Historical RSS cases selected for analysis. For this same reason, and to avoid and/or mitigate any possibility of any bias (Creswell, 2009), I chose to utilize triangulation in my study. Why is ‘Triangulation’ such a significant concept? In research, virtually all of the social and investigational sciences studying behavior, and, of note, particularly before the notion regarding ‘selfdom’, it is wise to embrace the adage, a two-legged-stool does not stand its own. The number “3” is a universal constant; an absolute necessity for a firm balanced stool to support appreciable weight.
Unlike research and published Mongan (2013), Langman (2015), and other investigations, this research study focused specifically on a criteria-based selection of a group of the absolutely depraved Rampage School Shooters (1995-2015): Dylan Klebold and Eric Harris (Columbine, CO); Elliott Rodger (Santa Barbara, CA); Seung-Hui Cho (Blacksburg, VA); Chris Harper Mercer (Roseburg, Oregon); Adam Lanza; and, Jaylen Fryberg (Maryville, WA). Of note, all of the aforementioned successfully concluded their theatrical performances (i.e., psychosocial tirades) with suicide. On January 1, 2016, the RSS database was locked to new RSS cases (N = 59).

**Mental Health and Education.** One significant notion driving my research is the lack of an operational definition ascribed to the prevalence of ‘Mental Health’ violence in our school system. Many professionals hold different notions about its meaning, societal significance, as well as how to describe its characteristics. Not surprisingly, given the use of this term in the media, and almost on a daily basis (politics, religion, world history, Iraqi and Afghanistan wars, urban crime and poverty, immigration problems, etc.), one’s mental status, social-economic status (SES), and intelligence quotient (IQ), are associated with various violent tendencies and/or uncivilized understandings. Despite the incredible amount of socio-political rhetoric bantered about, the fact of the matter remains true – ‘Mental Health’ and Rampage School Shootings are exceptionally controversial issues affecting all facets of our postmodern society. On the grand scheme of topics promoting humanity, *all* lives matter, including the lives of those planning the next Rampage School Shooting.

Mental Health, like personalities, is a diverse and uniquely distinct concept. Everyone inherits choices in life which develops and shapes our personality, designates our changing perspectives. Entwined within this biopsychosocial phenomenon are dynamic patterns and
attributes specific to our quality of health, our beliefs and associated mental health status. In the final thralls of the human experience – Human Condition – health and well-being are understood as the intersection of approach (es) vs. perspective(s). But is illness considered a threat to mental health and wellness, or, vice-versa? In light of the incidence of Rampage School Shootings witnessed across the U.S., the data show an interesting association and/or perhaps intersection with and between specific documented RSS attributes.

Readers might wonder why they should care about this emerging psychosocial problem. I would think the answer to this question is obvious: School violence is an inexcusable violation of one’s right to life, liberty, and the pursuit of individual happiness. Simply put, little children and school teachers head out for the start of school, only to never return home at the end of the day. As a result of evidence-based information, School shootings qualify as an ‘everyday problem’. Neither just an educational problem, nor a public health crisis, Rampage School Shootings remain a fatal threat to everyone’s existence. As is the case with many debilitating, critical diseases – cardiovascular disease, diabetes, obesity, and, of course, cancer – prevention is primary (Cohen, Chávez, and Chehimi, 2010). Educational administrators and teachers, Public Health professionals, Mental Health policymakers would benefit from the following Position Statement, which captures, in my opinion, the intention and systematically archeological expedition fueling this dissertation research:

Prevention and promotion should complement the treatment of mental illness with a strategic, sustainable population approach. Inequality is a key underlying determinant of mental illness and as such it must be addressed in a public mental health strategy. Mental health promotion and mental illness prevention offer an important opportunity to reduce the burden of mental illness with the potential for large-scale prevention of human suffering and associated significant economic benefits (RCP, 2010, p. 33).
Is it possible to develop and sustain an effective education system in the presence of increasing, incredibly fatal Rampage School Shootings? Moreover, how does this emerging phenomenon impact the overall school climate – safety and learning (Gittins, 2014)? The findings in this study unquestionably support profound assertions provided by other researchers and theorists: there is no health (i.e., educational learning, positive social interactions and relationships, family dynamics, and personal growth, willingness to achieve, respect for the social law and order, etc.) without mental health (Prince, Patel, Saxena et al., RCP, 2010; MHDDOH, 2011). Within a postmodern, civilized, urban or suburban society, health and safety absolutely depends on the positive mental status of the many.

Epidemiological assessment of Retrospective Historical Rampage School assailant cases is a critical step not only in understanding biopsychosocial constructs of ‘being’, but also a significant means in the attainment of a reasonable school safety improvement strategy (Gittins, 2014). The Biopsychosocial Model is direct evidence against the argument arrogantly proposed by ‘B.F. Skinner compatriots’ that the Black Box theory ever held real association with the Naturally-complex Human Being and his/her Political Mind.

Rampage shootings were no longer the provenance of isolated, loner students who were psychologically deranged. Columbine raised rampage shootings in the public consciousness from mere revenge to a political act… Klebold and Harris identified the collectivity—outcast students—for which they were exacting revenge. (Larkin, 2009, 1320).

Every individual behavior, individual decision and outcome exacted by the various criteria-based RSS studied (N=59), even in light of various forms (i.e., degree) of psychopathology, demonstrated evidence of exceptionally distinct individuality and immoral intention… How do we truly define, justify, and measure such a thing as Nature-Nurture? Every predictor variable examined in this study and exercised by at least one RSS assailant, is an
astounding to the innate, complex neurophilosophical qualities of the Human Mind. Primary point of my argument, and significant outcome from this dissertation study for school professionals (i.e., School Counselors/Psychologists, teachers, Principals, parents, communities, etc.): evaluate the wholeness of every student or individual or person.

RSS ideology, like political terrorism (Larkin, 2009), is replete with psychosocial symbolism, innate rage, fueled by a “… rebellion against history…” (Camus, 1991, p. 95). In other words, RSS acts of violence symbolize a rejection of God and moral reasoning. Specifically, this notion of ‘Duality’, practiced by one of the most complicated, and mentally unstable RSS – Adam Lanza, who brutally murdered 20 elementary school students and six adults (Sandy Hook Elementary School, Newtown, Connecticut) – was an interesting discovery within my research, which I failed to find mentioned or discussed elsewhere in the literature. It was such a surprise that I instantly decided to include it and name it accordingly as a variable pertaining to fatal violence by the same assailant who commits fatal violence in both home and schools. As my RSS research showed (see Table 2), 8 (16.9%) out of 59 (100%) individuals met this criterion. The depth and intensity of rage these young individuals are capable is incredibly off the charts. Often, I stood wondering how is this possible. What could motivate one to murder family members and young school children/students? Again, this information remains as concrete evidence why it remains of great importance for School Counselors/School Psychologists and other professionals to critically assess the ‘wholeness’ of an individual.

Nature and Nurture: Eternal Mastodon in the Room. Cultural and racial notions involving identity and self-concept compel developmental psychologists to expand their definitions and social psychological scope, adds immeasurable fuel to the Nature-Nurture debate, adding valuable information and/or cultural data to our psychological knowledge database. The
adage that “people are people” is an utter myth… Every person is not alike, nor are we – as a whole, the human race – defined by a single standard (theoretical framework, or measurement). Life events, place, personal experiences are as diverse as the universe is vast. Objectivity and the scientific method require scholar-practitioners to remain flexible and adaptation in all studies/investigations.

Difficult as it may appear to accept, I remain mindful of the notion that violence, across all spectrums, “… is intrinsic to humanity” (Katz, 1998), firmly entrenched within the genetic coding of our DNA. I also wonder if this very same perspective could question whether or not violence is a prime ingredient of what we come to acknowledge as Human Nature. This supposition is not stated within an evolutionary vacuum; certainly, not without critical analysis of the biological basis of the brain – body, mind and spirit (soul) – as a function of “… society, economy, and politics … in the make-up of a violent individual” (Katz, 1998). No doubt, RSS complexity is profound, as well as, by virtue of genetic distinctness, incredibly idiosyncratic…

Why use the term idiosyncratic? Aren’t all Rampage School Shooters cut from the same cloth, bred from the same mold? On first blush, one wouldn’t hesitate to adopt this assumption. However, an intensive, systematic and intentional, archeological assessment of 20-years of criteria-based RSS data (1995-2015), speaks to the contrary. Thus, the need to state RSS assailants are as varied and complex as the general population. With respect to the following two research questions,

- **Question 1:** Is there an association between
  a) RSS assailants 11-36 years of age (1995-2016) and psychological therapy and/or anxiety/depression medication?
  b) the number of RSS deaths and criteria-based RSS assailants who were 11-36 years of age?

- **Question 2:** Which of the following variables is the best predictor of a Rampage School Shooter?
a) Age in years;
b) Gender;
c) Race;
d) Attempted Suicide or Successful;
e) Psychological therapy;
f) State;
g) Anti-social Personality Disorder;
h) Internet;
i) Bullied;
j) Schools.

fifty-nine criteria-based cases (N = 59) and eighteen attributes (i.e., variables; see Table 1) were statistically analyzed.

**Biopsychosocial Model (BPS).** What is my point of view regarding the role of biology and violence? The Nature and Nurture (Pinker, 2004) of the underlying psychoneurological foundation comprising a ‘Killer’s mind’, has been thoroughly addressed within the literature (Lakoff, 2009; Fabian, 2010, Smith, 2006; McNiel, Borum, Douglas, Hart, Lyon, Sullivan, & Hemphill, 2002, p. 153). Specific notions surrounding biopsychosocial factors contributing to homicidal activities remain under scrutiny. What motivates one to murder, to commit heinous acts of violence, particularly within the sacred auspices of a school setting? Ioana (2013) makes a reasonable attempt at identifying biopsychosocial precepts to answer deeply challenging, neurophilosophical questions

Neither the intelligence, nor the thinking, the memory, the imagination, or the language of a killer are the psychological causes of his murders, but the deeper springs of his personality: the emotional, motivational, natural factors that were generated not only by hereditary, biological factors, but by the factors related to education, socialization, culture and, especially, the socio-economic environment the individual lives in (Ioana, 2013, p. 324).

I find it highly improbable for healthcare professionals to achieve any measure of significant health/wellness success without first considering a biopsychosocial model extending into the patients' environmental landscape (ethnic, cultural, gender-based, SES communities).
Proper adjustment of the investigation ‘dimensional analysis lens’ – telescopic vs. microscopic – remains absolutely necessary to attain an appropriate research footing into the inception of understanding RSS violence. Knowing when to gaze upon behavior from ‘the 10,000 feet point of view’, sort of speak, versus drilling deeper into the finer details of individual attributes, assisted greatly in utilizing the biopsychosocial model. In other words, it’s not enough to simply have the BPS in one’s possession. You need to know when to use which setting to properly understand intricate and external details. Franz Boas and Margaret Mead, as renowned anthropologists, successfully mastered this very same concept when studying primitive cultures and their undocumented behavior. RSS behavior is no less different, certainly complex. However complex or unprecedented, the truth remains true, human behavior is behavior… Thus, remains the underlying basis for my investigational decision to use the BPS model.

**Rampage School Shooter (RSS) Improvement Strategy.** Development of a Dissertation Research Plan ‘capable of’ meeting the need (-s) of an emerging educational and Public Health problem with Continuous [process] Improvement – is imperative. Moreover, Quality Assurance (QA) should also become a viable objective in the design of an educational problem of practice. How might this research plan be designed, developed, implemented, and sustained to meet the needs of our school system’s capacity?

This is a time-stamped process (see Appendix B), an absolutely critical Process Map detailing margins of impact, lines encasing the ‘problem-scene’, if you will. What and where is/are the hot-zone(s)? What has been done before to address the problem? If nothing is found, and there is found a gaping hole – an effectual gap – then the approach requires a systems analysis. Why was it not successful? Documented evidence of the investigation and/or improvement effort?
A ‘Solutionitis’ approach is undoubtedly beyond consideration; a measure far from reality… Never indulge the “quick judgement pathway” … Taking-a-step-back, might add further insight into how one might proceed, discover the best approach to tackle problem is much more logical and scientifically sound approach. Choosing a lens more attuned to the problem is always advisable: microscopic vs. telescopic. Becoming a user- and problem-focused leader requires the following tools/skillsets: 1) observe; 2) understand through research and assessment; 3) develop; 4) evaluate; and 5) define. Understand what is/are acceptable limits of ‘variation’ (risks)? How to measure or develop metrics to understand the problem? What are the right tools to further understand the root cause or primary factor (-s) associated with the problem? Becoming a ‘user-centered’ leader: requires “… respecting the people who actually do the work by selecting to understand the problems they confront. It means engaging these people in designing changes that align with the problems they really experience,” including developing relationships with educational practitioners, researchers, and various types of subject-matter-experts (SMEs). In other words, the best approach to enhancing my doctoral work to become more problem-specific and user-centered is via the engaging of insightful information from the base-floor employees (i.e., workers) who might assist with my susceptibility to Solutionitis and the one-size-fits-all approach to educational approach.

**School Counselors as Change Agents.** What do we say about adolescent and/or young males who engage in chronic antisocial, school-based homicidal/suicidal behavior? Was there something from their family upbringing or during birth that contributed this bewildering anomaly? Did he, or she, experience a stressful life event? Was there an absence of a positive self-image or the continuation of a string of unhealthy social relationships that contributed to the need to simultaneously engage in rampage school homicide/suicide? These are the types of
questions that figure into one’s realistic notions of health and well-being. Said differently, health is quite individualistic, personal, and referable to one’s state of mindfulness and quality of life.

So, what are school counselors doing to ameliorate and/or manage the rising number of students diagnosed with Mental Health problems (see Table 2; approximately 19 (32.2%) RSS were diagnosed with or treated for psychological problems). Of greater significance, Psychology Therapy as a predictor variable showed significant correlation with the following RSS variables: 1) Number of Injuries = .38; 2) Age in Years = .39; and 3) Number of Deaths = .33 (See Table 6).

School Counselors are the bloodline of an educational environmental ‘system’, vital …in critical leadership roles in terms of school safety, positive school climate, and providing school-based mental health services: school counselors, school psychologists, and school social workers. Their training and expertise help link mental health, behavior, environmental factors (e.g., family, classroom, school, and community), instruction, and learning. Each of these professionals helps to create school environments that are safe, supportive, and conducive to learning (Cowan et al., 2013, p. 9).

How are School Counselors effectively managing the increasing prevalence and incidence of Rampage School Shootings? Recent evidence shows School administrators are failing to utilize properly trained School Counselors to aid in school violence strategies, who, in turn, feel they don’t Matter. In my doctoral degree class (Cohort 3, Duquesne University), Stephane McHugh shared her unfortunate experience from a former employment, where she formerly worked as a High School student counselor, where she was relegated to various administrative tasks and other duties assigned. In other words, School Counselors roles are perhaps undefined and “… overly brood” (Carey and Martin, 2015, p. 1).

School Counselors are an invaluable asset not only to assist students better understand the academic community through healthy, empathic, nurturing relationships, but also, in assisting students and teachers with incredibly dangerous and equally ‘deceptive’ behavior, as well as
stress management/mitigation strategies. The following information was associated with Alex Hribal, a 16-year-old Pennsylvania high school student, who used a hunting knife on school grounds to injure 21 students:

While executing a search warrant April 9 [2014], police found a handwritten document in Alex’s locker, dated three days before the attack, that reads in part: “I can’t wait to see the priceless and helpless looks on the faces of the students of one of the Best Schools in Pennsylvania [when they] realize their precious lives are going to be taken by the only one among them that isn't a plebeian,” investigators wrote in the complaint (Born, 2014).

In accordance with the National Model for School Counseling Programs utilized by the American School Counselor Association (ASCA, 2003), School Counselors, and certainly School administrators, need to concern themselves with the promotion of “…emotional, social, and cognitive growth while preventing problems in the lives of young people” (Baker & Gerler, 2001; as cited in Rayle & Myers, 2004, p. 305).

Who is held accountable when young, adolescent student begin to express Mental Health issues? Why are trained School Counselors denied their primary roles/responsibilities, which contribute to loss of identity, self-efficacy in the educational workplace? According to the ASCA (2014), accountability is defined as

To demonstrate the effectiveness of the school counseling program in measurable terms, school counselors analyze school and school counseling program data to determine how students are different as a result of the school counseling program. School counselors use data to show the impact of the school counseling program on student achievement, attendance and behavior and analyze school counseling program assessments to guide future action and improve future results for all students. The performance of the school counselor is evaluated on basic standards of practice expected of school counselors implementing a comprehensive school counseling program.

School Counselors need to interact freely, on a daily basis, professionally with the student and community body politic to enact what Arnold H. Glasow stated argues: One of the tests of leadership is the ability to recognize a problem before it becomes an emergency. School
Counselors need to “…to act purposefully, to think rationally, and to deal effectively with the environment” (Gregory, 2007, p. 165), willing to work

… with a complex identity who are intellectually autonomous and prepared to cope with uncertainty; who are able to tolerate ambiguity and not be driven by fear into a rigid, single-solution approach to problems, who are rational, insightful and who look for facts; who can draw inferences and can control their behavior in the light of foreseen consequences, who are altruistic and enjoy doing for others, and who understand social forces and trends (Robert J. Havighurst quotes).

To better achieve a firm School Violence Prevention program, understand the nature and nurture of an emerging school fatal phenomenon which has become a threat to everyone, schools need to train and utilize effectively ‘trained’ School Counselors (see Appendix B). In addition, as mandated by Pennsylvania Department of Education, schools must adopt evaluation programs to address student academic and behavioral problem(s), adequately represented by administrators, student counselors, teachers, and additional institutional staff (AEDY, 2009).

U.S. Schools remain in dire need of National Educational Reform. In order to fully and effectively benefit from this change, the roles and professional responsibilities of School Counselors must undergo revision consistent with the educational culture and risk(s) properly faced on a daily basis. No longer does the Nice Counselor add value in postmodern schools with changing demographics. No longer are Nice Counselors able to manage demanding uncompromising organizational change and children suffering from violent school shootings. The Nice Counselor Syndrome (NCS) is not beneficial to the educational rights and individual learning needs of our children. Interestingly, the Nice School Counselor represents, in truth, “…much of the resistance that counselors demonstrate in failing to make the kinds of professional changes recommended by multicultural/social justice school counseling advocates” (Bemark & Chung, 2008, p. 372).
NCS is … manifested by many good-hearted, well-meaning practitioners who are commonly viewed as being “nice” people to be around and to work with in school settings. These counselors live up to their reputation of being nice people by the manner in which they consistently strive to promote harmony with others while avoiding and deflecting interpersonal conflicts in the school setting (Bemark & Chung, 2008, p. 374).

According to Carey & Martin (2015), “…most state departments of education do not have adequate mechanisms in place to support the widespread implementation of the endorsed state school counseling models or the adoption of effective practices” (p. 2). Meaning, the immediate need rests with individual States to develop effective School Counseling policy focused on the improvement of capacity, commitment, and confidence in education to promote and sustain learning, safety, and wellness (Carey and Martin, 2015). School Counselor policy research provided by Civic Enterprises (2011) reported “… little alignment exists among counselor training, work assignments and school goals. Instead, there seems to be consistent misalignment between the counseling field and the education system.” (Carey and Martin, 2015, p. 6). Lastly, to effectively prepare and add value to School Shooter Prevention programs (see Appendix B), Schools Counselors must participate in, at least on an annual basis, local or annual affording 1) risk assessment/management; 2) psychosocial QA system framework education; 3) school shooter evidence-based information; 4) and innovative threat assessment training; and, of course, 5) Application of Biopsychosocial therapies:

- Recognition of the value of positive relationships to improve health care;
- Use self-awareness as a diagnostic and therapeutic tool;
- Elicit of history in the context of life circumstances;
- Decide which aspects of biological, psychological, and social domains are most important to understanding and promoting student health;
- Provide multidimensional treatment (URMC, n.d.).
Data-Driven Decision Making. In the postmodern era, data evolved to become the unprecedented catalyst which powers corporations, institutions, military organizations, and schools, to foster change (The importance of data). Without this feature, this acceptance that a ‘change’ is needed, then growth will remain foregone conclusion. The change to which I speak is none other than ‘Continuous Process Improvement (CPI)’, the best approach for the initiation of Total Quality Management (TQM) in schools (Detert, Schroeder, and Cudeck, 2003). Research shows data-decision making strategy is an excellent tool for the improvement of both public schools and universities.

The theory of action of the basic standards-based reform model suggests that, armed with data on how students perform against standards, schools will make the instructional changes needed to improve performance. Schmoker suggests a process of collaboration and brainstorming, combined with data collection and analysis based on student assessment, was responsible for numerous examples of schools increasing test scores… (Schmoker & Wilson, 1995).

What is DDDM? DDDM (see Appendix B) is a theoretical framework of action that has assisted schools achieves academic and organizational excellence through: 1) the assemblage of qualified raw data; 2) critical analysis to ensure data relevance and significance; and 3) quality assurance data informs operational and education decisions (Gill, Borden, and Hallgren, 2014).

Dembosky, Pane, Barney, and Christina (2005) reported the school districts in Southwestern Pennsylvania (SWPA) use of a DDDM framework were invaluable in “… align[-ing] their curricula and instruction with the state standards … improve their performance on Pennsylvania’s standardized achievement test”. DDDM provides additional utility in exposing “… existing capacity, needed supports, and obstacles…” (Dembosky et al., 2005). DDDM is a proven resource for educational leaders (see Appendix B). Whereby

Leaders can use data to put into place mechanisms to support individual and collective learning surrounding data by pursuing such questions as: What are the data telling us?
What can we learn from the data? How can we change our practice in light of the data? What other data do we need to collect? (The importance of data-based, n.d.)

Therefore, I argue DDDM is a powerfully proven tool capable of integrating with and adapting to types of data to improve schools. Moreover, I am making the investigational claim, if DDDM was so successful with improving achievement scores, organizational development, compliance measures of performance and excellence in schools, why shouldn’t an evidence-based DDDM assist in the improvement of school violence prevention strategies?

**Self-Reflection.** Have you ever wrestled with an 18-head Hydra? (Each head represented a specific study RSS variable). Well, until three years ago, neither have I. To enter the lair of the hydra, gaze upon the RSS human carnage (1995-2015) – a graveyard of dead bodies, disemboweled souls, a laundry-list of injuries – was like searching within a labyrinthine under darkness… How does one enter such a vile place and return unaffected, harmed? How to survive a dangerously informative, dank excursion? It’s been said over the years, every morsel of knowledge, demands a price…

Frequently, and without an ounce of exaggeration, I rummaged through voluminous RSS accounts of sorely dreadful and emotionally jarring home and school fatalities. Several times, I resigned to walking away to expose myself to much brighter and spirit-lifting environments for days at time… The effect of immersing oneself in such horrible information, day after day, was mind-numbing and spirit-draining work. I understood the price, as I chose to thoroughly investigate this disturbing Problem of Practice. In all honesty, I have absolutely no regrets, and given the chance to choose again, the outcome would be the same… When I stepped from the Literature Review inquiry, I frequently visited *Man’s Search for Meaning*, by Viktor Frankl (March 26, 1905 – September 2, 1997), Austrian Neurologist/Psychiatrist, and Holocaust survivor. Original 1959 title was *Trotzdem Ja Zum Leben Sagen: Ein Psychologe erlebt das*
Konzentrationslager (Translation: Nevertheless, Say “Yes” to Life: A Psychologist Experiences the Concentration Camp). What a fabulous read, a fine testament to incredible meaning-making, existential choice … Frankl (2004) wrote “What is to give light must endure burning”. In the Old Testament of the Bible, it says: “Can a man take fire in his bosom and his clothes not be burned?” (Proverbs 6:27, King James Version).

Was this the missing critical developmental ingredient, the illusive key element every RSS failed to acquire during early childhood development? Might the lack of this very significant attribute be the primary quality contributing to young men becoming lieutenant’s school deaths and chaos? In my opinion, Frankl’s powerful book holds great promise for young men courting rigors of despair and suffering through intractable episodes of deep depression. Perhaps, Frankl’s book might engender hope to middle/high school students as a school shooter prevention strategy.

We stumbled on in the darkness, over big stones and through large puddles… [where] for the first time in my life I saw the truth as it set into song by so many poets, proclaimed as the final wisdom by so many thinkers. The truth – that love is the ultimate and the highest goal to which man can aspire (Frankl, 2004, p. 30).

So, what were some of my greatest challenges? Realistically, as the literature has shown, investigators and researchers as a whole are subject to all manner of foibles, biases, and indiscretions that would invalidate outcomes and reasoning. The same could be said regarding the existential meaning-making, stressful life events, and unimaginable choices culminating oftentimes in genuine moments of awakening and reckoning (Klebold, 2016). First, my greatest Dissertation “… [flaw] in reasoning, logic, force of argument…” (Creswell, 2009) rests with the irresistible urge to soak my Dissertation Literature and Context Reviews with interdisciplinary and scientific scholarly references, which, more often than not, particularly in the presence of Dissertation investigating a rather complex Educational and Public Health problem, I’m not so
sure this is the best approach. A concise, realistic strategy, using techniques grounded towards reader’s grasp and understanding of neurophysiological and theoretical arguments illustrative of and consistent with a discerning Scholar Practitioner served as my guide during iterative editing of the material.

Conclusion

Foundations of knowledge of an everyday life remain not only a psychosocial journey, but a stressful one at that. Not everyone is capable of either adapting or conforming to aspects consistent with dangerous survival in the confines of what most come to experience our postmodern ‘concrete jungle’ (i.e., urban cities). The concept of stress, relative to one's developmental stage, remains an individualistic concept. Not many within the general public accept or understand the following evidenced-based maxim: ‘Stress is a silent killer’. Perhaps a significant factor is how much ‘learning’ is involved in both adaptation and the information management (strategy and tactics) of knowledge, as we grow and seek to become “… cooperative, helpful … satisfied…” (Kaplan and Kaplan, 2003, p. 1484). The challenge for everyone lies in our ability/capability to explore and understand what is reasonable vs. unreasonable behavior...

Stress management is, profoundly, a fact of life. Something we must all face if we are to live a good quality of life, experience health and wellness. In a rapidly changing postmodern society, and rightly so, researchers and scientists contend stress deserves considerable attention as it is extremely capable of disrupting health and shortening lives. Further investigation conceptualizes the following stress buffers: a) Commitment – the ability to socialize and learn through activity; b) Control – the drive to have a voice, participate in the outcome; and c) Challenge – taking advantage of good vs. bad experiences, learning from them to make oneself
stronger, wiser, fit for the coming seasons (Maddi, 2007). Each of these interesting qualities signifies particular abilities within certain individuals which ultimately serve to strengthen individuals, internally and externally, to survive and make a difference. How much of this is truly ‘intentional’, outcroppings of genetic drifts, or learned experience, remain a task for social scientists and specialized health psychologists.

The underlying motivation of any and every Scholar Practitioner remains the imparity of mental health and individual wellness, the hermetic foundation of an unwavering, individualized education regarding 1) the nature of ‘selfdom’; 2) the nurture of truth, and 3) how to drive home the inalienable right ‘each one, teach one’…! Scholar Practitioner should never forget Social Justice is founded upon and driven by mental health and individual wellness. We are all children of those who have tasted slavery and bondage in one form or another… Our blood remembers the past. We must tap into our archetypal memories… Awaken to and forever become purveyors of Mental Health Social Justice for all…

How do I, as a prospective Scholar Practitioner, aid in the ‘annuitizing’ of self-efficacy, psychological confidence, to a much-needed, effective learning-environment caldera? The unfortunate reality lies in the notion, particularly for someone like me – a psychosocial ‘outsider’ peeking in – that public education subsists on a quotidian existence bound within an unfortunate Dark Age (tethered to the Dark Ages) ‘educational system’. Why does it exist as a castaway from a Pedagogical Enlightenment? When will the American educational system, as a whole – School safety procedures/processes, access/equity, Mental Health Social Justice – become rescued?

Frequently in Nature, living creatures are born into this world with some constitutional anomaly that challenges its existence, overall chances for survival. Although we may argue
against this phenomenon information, however we may reason why these school shootings happen, the fact of the matter remains an indisputable fact, as the results of my investigation show, prevalence and incidence of RSS are on the rise. Is it probable that the dramatic emergence of RSS across the U.S., evidenced by Mongan (2013), Langman (2015), and particularly the findings in my study, result from or occurred as an underestimation of “…inadequate appreciation of the connectedness between mental illness and other health conditions” (Prince, Patel, Saxena et al, 2007, p. 859)?

Attempting to meet its educational mission/vision as an equitable and sustainable “learning environment” for all, and on any given day, Public Schools remain at-risk institutions of becoming homicidal ‘crime scenes’. There is nothing more heartfelt, profound, then the death of a child… Worse, discovering another child or adolescent willingly planned elaborate schemes to murder children, adolescent students, and teachers.

As a prospective scholar-practitioner, a former neurodiagnostic researcher (see Appendix A), I certainly appreciate this ‘functional’ perspective as it applies to our objective social reality. The notion that society, our postmodern civilization exists and ‘behaves’ as a living-breathing community based on law and order, appeals to my sensibility of its layered relationships, psychosocial dependencies and emotional intelligence. Suicide is an unfortunate social disorder that is, in many respects, a barometer of the successes and failures (social shortcomings) of our functional society. Moreover, and of greater import, RSS phenomenon speaks more to the state-of-affairs of our postmodern culture, our distorted and fragmented political structure, than the effectiveness of our educational system as a whole.

**Final word:** Non Satis Scire (translation: To Know Is Not Enough). A biopsychosocial call to action remains in order…
Limitations of the Study

A number of limitations were identified in this study. On the one hand, a number of these were pre-determined. On the other hand, others occurred outside of the scope with the research design. So many points of contention and topics of interest lay on the periphery of this study which were not addressed. Primary reason for failing to expound on related areas of inquiry rested with my primary objective of limiting this study to answering the primary research questions accepted for research. However, to give voice to these very interesting RSS subjects, who might serve as prime candidates for future investigations, I list them here with further comments.

- Parents of Rampage School Shooters.
- RSS Medical Records.
- Access to Guns during Adolescent Development.
- Adolescence, Race, and Suicide.
- Terrorist vs. Rampage School Shooter Ideology.
- The Effect of Positive Support Systems and RSS Violence
References


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Appendix A

Clinical Research/Pharmaceutical Drug Development Affiliations:

1) Quality Assurance Scientist *(Department of the Army, Fort Detrick, MD 21702-5000)*
   Employed January 2007 – Present;

2) Drug Safety Analyst *(MERCK Inc., Blue Bell, PA 19422)*

3) Clinical Support Analyst *(PFIZER, Inc., Manhattan New York)*

4) Programmer Analyst *(GLAXOSMITHKLINE, Philadelphia, PA 19102)*

5) Drug Safety Analyst *(CENTERS for DISEASE CONTROL and PREVENTION, Atlanta GA, 30322)*

6) Senior Applications Developer Analyst *(EMORY UNIVERSITY, Atlanta, GA, 30322)*

7) Senior Clinical Programmer Analyst *(ATHEROGENICS, Inc., Georgia 30004)*

8) Clinical Systems Analyst – Neuropathic Pain *(PFIZER/PARKE-DAVIS PHARMACEUTICAL RESEARCH, Ann Arbor, Michigan 48197)*

9) Clinical Information Specialist/Medical Librarian *(SPECIALTY LABS, INC., Santa Monica, CA 90404-3900)*

10) Electroneurodiagnostic Technologist/ Magnetoencephalography (MEG) Laboratory Coordinator *(UNIVERSITY OF CALIFORNIA @ LOS ANGELES MEDICAL CENTER, Westwood, CA 90024)*

11) Electroneurodiagnostic Research Coordinator *(NATIONAL INSTITUTES of HEALTH, National Institutes of Neurological Disorders and Stroke, Medical Neurology Division, Human Motor Control Laboratory, Bethesda, Maryland 20892)*

Board Registered with the American Board of Registration of Electroneurodiagnostic Technologists *(ABRET)* as an “R. EEGT.” (August 18, 1984)
Registration Number: 1435
Appendix B

Dissertation Improvement Theory for a RSS Data-Driven Decision Making (DDDM) Actionable Intelligence Framework
### Appendix C

#### RSS Homicides & Offenders by Year, 2005-2015

<table>
<thead>
<tr>
<th>Year</th>
<th>RSS Offenders</th>
<th>RSS Homicide Victims</th>
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</thead>
<tbody>
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<td>11</td>
</tr>
<tr>
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<td>7</td>
<td>4</td>
</tr>
<tr>
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<tr>
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<td>12</td>
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</tbody>
</table>

#### Graph Description

- **Chart Title**: RSS Homicides & Offenders by Year, 2005-2015
- **Y-Axis**: Unit
- **Bars**: RSS Offenders (yellow) and RSS Homicide Victims (blue)
- **Years**: 2005 to 2015

- **Legend**:
  - RSS Offenders
  - RSS Homicide Victims
Appendix D

Normal P-P Plot of Regression Standardized Residual

Dependent Variable: Number of deaths identified

- Expected Cum Prob vs. Observed Cum Prob

Diagram showing the relationship between expected cumulative probability and observed cumulative probability for regression standardized residuals.