

Code Red: A Public Health Approach to School Gun Violence

A Case Study in Assessment and Policy Development
Mid-America Regional Public Health Leadership Institute Year 12 Fellows

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Abstract

The purpose of this case study (Code Red) is to demonstrate why school gun violence is a public health issue and to draw attention to the need for policy to address it. Traditionally, the concept of "safe schools" - addressing the global problem of violence in schools - has been managed under the auspices of the school systems, the Department of Justice, and the Department of Education, along with a number of community coalitions that have investigated youth violence. However, with the publishing of "Deadly Consequences" by Dr. Deborah Prothrow-Stith and Michaela Weissman in 1991, the challenge was issued to consider the problem as a public health issue, citing, "Public health people understand that behavior is difficult to alter and that change comes not as a result of a quick fix, but following a steady barrage of interventions that erode destructive attitudes and behavior over time." Former Surgeon General of the United States, C. Everett Koop, captures the essence of their message in the book's *Introduction* with, "...the discipline of public health possesses the solution to the mounting toll of violence in this country. The public health approach seeks to prevent tragedy; it seeks to identify and treat young males who are at risk for violence before their lives and the lives of those around them are ruined. The discipline of public health provides strategies to stop violence before it maims and kills."

Public health offers a community-based approach to health promotion and prevention of injury or disease. Utilizing a primary prevention focus, practitioners assess behavioral, environmental and biological risk factors with the goal to educate individuals and communities and to protect them from these risks. Code Red specifically addresses the assessment core function; and the ensuing team discussion details the policies integrating public health that need to be developed to address school gun violence.

This case study is a fictional account of events, based on actual events (Ramsland, Handlin, Frontline, etc.), that occurred in Redtown, Midwest as the town struggled to deal with an incident at the local high school. The case of Kirt Kunkel, 15, occurred in Redtown in May 2001 and involved the killing of Kunkel's parents followed by a separate shooting at school. Two students died and 25 were injured in the school incident. Kirt's behavior was indicative of a very troubled child with disciplinary and learning problems over an extended period of time. Kirt had a documented history of obsession with weapons, as well as many other "early warning signs" that were missed opportunities for intervention and possible prevention.

In the previous three years, two other incidents occurred in the region that involved students who brought guns to school and shot their classmates and teachers. In May of 2000, Newton Brazil, a 13 year old

student, was sent home from school, later returned with a gun, and fatally shot his English teacher. In March of 1998, Marcus Johnson, 13, and Andrew Garcia, 11, were involved in an incident that resulted in the deaths of five fellow students and wounding of 10 others, including a teacher.

The Code Red Action Team was formed to provoke thought among public health leaders surrounding the development of policies and interventions to prevent future incidents. We challenge future public health leaders to accept the charge of determining the stakeholders, defining the problem, seeking opportunities to identify risk, developing interventions, setting priorities for action, and putting their conclusions into a plan.

The Problem of School Gun Violence

In the fall of 2003, a team of public health leaders from Redtown, Midwest were assembled to be a part of a special commission created to address the increasing problem of school gun violence perpetuated by children. In recent years, three cases of school gun violence were noted in or near Redtown. Kirt Kunkel, Newton Brazil, Marcus Johnson and Andrew Garcia, youngsters between the ages of eleven and fifteen, all carried out violent acts at their schools. Their actions raised awareness of the problem in the community and prompted a call to action.

Given the nature of the recent tragedies and the public outcry, the Mayor of Redtown declared a state of emergency in the area of school violence; and together with city and county leaders, legislators, community coalitions and public health leaders called a "Code Red", and established the Commission for the Deterrence and Prevention of School Violence. The Public Health leaders served as the lead players of the commission and were commonly known as the "Code Red Action Team". The commission began with an assessment of the problem, followed by an intense investigation of the events that lead up to each of the three incidents.

The Tragedy of Kirt Kunkel

The first major school violence event hit Redtown in May 2001 when Kirt Kunkel, 15, was expelled from school for having a loaded pistol in his locker. Terrified as to what his parents would say and not wanting to face causing them another disappointment, Kunkel felt his only option was to kill his parents, classmates that had previously teased and belittled him and himself. Kirt's father picked him up from the police station that day and drove him home. Kirt went to his room and retrieved a semiautomatic weapon that he had hidden there. He then shot his father to death as the father sat at the kitchen table eating a sandwich. Kirt then called a friend and talked for a while as he waited for his mother to return home from work. He allowed her to pull into the garage and park her car. As she approached the door to enter the home, he stopped her there, told her he loved her and then shot her six times. Kirt placed homemade bombs around the house, one under his mother's body, and spent the night in the home with his parent's bodies before driving his mother's car to school the next day and firing off 48 rounds of ammunition into his classmates. Kirt killed two students and injured twenty-five others. He was wrestled to the ground by some other kids before he could turn the gun on himself.

From the outside, Kirt's family seemed like a very functional and happy family. Kirt's parents were both well respected teachers; his oldest sister, Louise, was a cheerleader and honor roll student. The family traveled together and were model community residents. However, from an early age Kirt displayed signs of depression and had disciplinary problems at home and at school. Below is a chronology of some key events in Kirt's life:

- Kirt was born in August 1985. He went to kindergarten in Spain for a year when his parents took a sabbatical from teaching in the United States. He was very frustrated in school where everyone was speaking a language foreign to him.
- KK entered first grade in September 1991. In a report card, his teacher indicated he "lacked maturity and had slow emotional and physical development".
- In 1993, KK was diagnosed with learning disabilities and was placed into special education classes for reading and writing, and in gifted and talented classes for math and science.
- In 1998, KK showed an interest in explosives and weapons. He used the internet to purchase a book about how to make bombs. Kirt's mother was concerned about the type of friends Kirt was spending time with.
- In 1999, Kirt was caught shoplifting a CD in a music store. His mother found a hidden gun in his room.
- In January 2000, KK was caught throwing rocks off of a bridge with a friend. One rock damaged a car, but there was no personal injury. KK paid for damages to the victim's car and performed community services as retribution. He showed remorse for his actions. He said his friend actually threw the stone that hit the car.
- February 2000: As a result of the rock throwing incident, Kirt's depression and his obsession with guns and explosives, Kirt's mother decided to send him to a psychologist for counseling. He was diagnosed with "major depressive disorder" and given a prescription for Prozac.
- March 2000: Kirt continued to see the doctor for depression. The psychiatrist noted that his parents were "impressive parents" for wanting their son to take responsibility for the rock throwing incident. The doctor saw nothing out of the ordinary with Kirt or his family.
- April 2000: Kirt's psychiatrist noted that he was less depressed and handled anger better but that he still had an interest in explosives.
- In May 2000, Kirt was suspended from school for fighting with a student in his class.
- On 6/28/2000, Kirt's father went with him to buy a gun. His psychiatrist was concerned about the gun purchase.
- Kirt's psychiatric treatment was discontinued on July 30, 2000 since he was doing well in school.
- In the summer of 2000, Kirt bought a gun from a student at school and hid it from his parents.
- Kirt entered Redtown High School in the fall of 2000. He also went off of Prozac.
- September 2000: Kirt's father bought him a semi-automatic rifle, but told him that he could only use it under his father's supervision.
- October 2000: Kirt delivers "How to make a bomb" speech in public speaking class.
- On May 20, 2001 Kirt was expelled from school for having a gun in his locker. He was embarrassed about how his father would react to his expulsion. KK returned home from school and killed his father while he was eating at the kitchen table. KK waited for his mother to return home from work, told her he loved her then killed her.
- On May 21, 2001 Kirt drove to school dressed in a trench coat with a semi-automatic rifle and a knife taped to his leg. He went on a rampage and killed 2 students and injured 25 others.

After this tragic event, much research was done to better understand why Kirt Kunkel killed and if it could have been prevented. Some retrospective thoughts about this case follow.

Even after he killed their parents, Kirt's sister, Louise, still loved Kirt very much and knew that he had struggled with learning disabilities from early on in Spain. Many said he came from a "good family" and had

understanding, caring parents. His mother was said to have been very proactive about getting him in treatment after the rock throwing incident. Some have speculated that he may have felt like a failure compared to Louise and never lived up to his parent's expectations. Some friends at school said he spoke of "voices in his head"; others said he told them that he would soon do something "memorable". He was voted by his classmates as the person "most likely to create World War III" and was obsessed with guns, explosives and other weapons. He had trouble controlling his anger and had disciplinary issues both at home and at school. He was said to have had feelings of hopelessness and loneliness and was suicidal. Kirt was once quoted as having said "My only hope is that tomorrow will be better. When I lose hope, people die". He used Prozac, which has since been found to, in some cases, cause psychotic side effects in a small percentage of minors.

Other School Shooters

Newton Brazil, a 13-year old student, shot and killed his English teacher on the last day of school. The shooting took place after Newton and a friend had been sent home early on the last day of school for throwing water balloons. As they were leaving, Newton told his friend he was going to get a gun and return to school to shoot the school administrator who had dismissed him. Newton arrived home and could not find his mother or grandmother to return with him to school to discuss his dismissal. Newton then took a gun and returned to the school. Newton arrived at the door of his English class and asked to speak with two friends in the hallway. The English teacher refused and sent Newton away. Newton pulled out the gun, pointed it in his English teacher's face and shot. He said he only pointed the gun to scare the teacher, but it went off accidentally.

By many accounts, Newton seemed to be a well adjusted teenager who was doing well in school. Unique to this case is that Newton held his victim in high esteem. Newton considered this teacher one of his favorites. In addition to mentioning to a friend that he planned to return to school with a gun and shoot an administrator, Newton had shown the gun to his classmates a few weeks prior. The gun in question was stolen by Newton from a family acquaintance. Some indications also suggest that Brazil was smitten with the girl he requested to see in the English class and the shooting was a youth reaction to being denied access to her.

Marcus Johnson, 13, and Andrew Garcia, 11, are cousins raised in Jonesboro, Arkansas, who carried out a plan that resulted in the deaths of five fellow students and wounding of 10 others, including a teacher at the Westside Middle School. Marcus, the elder cousin, was the leader in this tragedy, vowing to "kill girls who broke up with [him]" following the break up with a girl friend just two weeks before the incident. He was heard by classmates just the day prior saying that "he had a lot of killing to do", but no action was taken. On the morning of the 24th, the two cousins took the Johnson's family minivan (driven by Marcus) and headed towards the Westside Middle School armed with rifles and handguns, reportedly belonging to Andrew Garcia's grandfather. On their way to school, they stopped at two or three gas stations, but no attendant would sell them gas because of their age. But somehow they made it to the school, dressed in camouflage, and ready to attack. Andrew entered the school, tripped a false fire alarm to lure students outside and then ran back to the designated position where Marcus was waiting to open fire. As students exited the building, in response to the fire alarm, the boys mowed the students down with gunfire.

Discussion of themes- Early warning signs

What makes these young people kill? The Code Red Action Team examined each case carefully, attempting to identify themes or early warning signs that were common to these cases. While there do not

appear to be specific “events” that spawned these killing sprees, there are some relevant similarities that are evident among these three cases.

Child psychologist Johnathon Kellerman, author of Savage Spawn: Reflections on Violent Children says that a good predictor of dangerousness in children is the combination of a certain temperament with a chaotic environment. In each of these three cases, the killers had some exposure to violence. However, that violence was not openly apparent to the parents, school officials and community members that interacted with these boys on a daily basis. Kirt Kunkel used a small collection of books to educate himself about explosives and bomb making. He then began to stockpile firearms in his home and detonate his homemade bombs in the woods behind his home to vent his feelings of anger and frustration. Although his parents were not violent people, we believe that his strained relationship with his parents coupled with his strong desire to please them created feelings of failure and despair in Kunkel. His lack of popularity among his peers seemed to only add to the chaos that went on in the mind of this lonely, immature boy. He was holding out for hope that his world would change. In his words, “when I lose hope, people die”.

Newton Brazil witnessed the physical abuse that was inflicted on his mother by her boyfriend. He often tried to rescue her from the abuse. What everyone saw each day was “a good student with little history of disciplinary problems”. But domestic violence was never discussed in Brazil’s home. He had no outlet for his feelings and therefore kept everything inside. Eventually, it bubbled over. In the case of Andrew Garcia and Marcus Johnson, the boys had been introduced to guns and hunting at very young ages. “Killing was made a central part of their understanding of what defines manhood”.

There were other commonalities among these cases. All of these boys had troubled relationships with their fathers. Sometimes, the father was absent altogether. These boys had feelings of low self-esteem and poor social skills. They were loners, or outcasts. Additionally, they had all been rejected by the young girls that were the objects of their affections. So what makes these young people kill? Dr. Helen Smith, a forensic psychologist in Knoxville, TN conducted a national survey of violent and non-violent kids. She found that “using guns and being violent toward others moves these kids from powerlessness to power, from nobodies to media celebrities”.

Pointing Fingers: The Shift of Responsibility

In hindsight, the warning signs should have been obvious. Many blame the parents. Others blame violence in the media that youth are exposed to. Still others question the police, the school, and judicial or mental health systems that may have had run-ins with the perpetrators. The National School Safety Center has created a profile of the kid most likely to commit school violence, based on the profiles of kids who already have. The 20-item checklist includes drug abuse, tantrums, threats, depression, truancy, cruelty to animals and a fascination with weapons and violence that spills over into schoolwork.

Profiles, however, are problematic because they tend to apply to a lot of kids who never become violent. Using a profile gives one the tendency to stereotype and group a large number where only a very small minority will act. And there is no guarantee that the kids most likely to kill won’t be missed.

Violence in movies, TV and video games has become pervasive in our society and studies have shown that media violence can lead to aggressive behavior in children. By age 18, the average American child will have viewed about 200,000 acts of violence on television alone. The American Academy of Pediatrics

states that violence is especially damaging to young children (under age 8) because they cannot easily tell the difference between real life and fantasy. They go on to say that media violence affects children by:

- Increasing aggressiveness and anti-social behavior.
- Increasing their fear of becoming victims.
- Making them less sensitive to violence and to victims of violence.
- Increasing their appetite for more violence in entertainment and in real life.

Additionally, media violence often fails to show the consequences of violence. This is especially true of cartoons, toy commercials and music videos. As a result, children learn that there are few, if any, repercussions for committing violent acts.

This, however, does not explain the majority of children who are exposed to the same influences and grow up to be productive members of society. Ultimately, the media does not commit the crimes, people do.

Many have pointed to the accessibility of guns as the cause of this growing problem. Has our society taken this matter seriously? Our answer is no! The proliferation of guns in our society is startling. How many gun laws have been changed? Not enough. Even current gun laws aren't being universally enforced. Despite continued acknowledgements by school shooters that the guns they used were stolen from parents or other family members, many parents have still not disposed of their guns. Some are still traveling to the local Wal-Mart to buy rifles or guns *for* their children. Has every family in a school community where there has been a lethal school shooting destroyed every gun they own? Of course not, but this is a question that all community stakeholders need to consider.

Missed Opportunities

Could anything have been done to prevent the murders of Kirt Kunkel's parents, the murders of two students and the injuries to 25 other students at the Redtown, Midwest school? In hindsight, many of the public health leaders on Redtown's special commission on school gun violence think that there were warning signs that were missed or went unheeded in the years preceding the killings.

Kunkel exhibited many of the early warning signs at a young age: a troubled childhood, disciplinary problems, early learning disabilities and an obsession with weapons. As a high school freshman, Kirt was caught for shoplifting and had a gun hidden in his room. A year later, he was again in trouble for rock throwing and property damage. He was diagnosed with a major depressive disorder and started on an antidepressant.

Newton Brazil was a model student and overall a "good kid". He didn't have constant and recurring disciplinary problems. However, he was constantly exposed to violence in his home and he had no outlet for his feelings. His mother did not seek help for the domestic abuse that she was suffering. Neither did she talk with her son to reinforce the basic fact that what he was seeing was not socially acceptable. His attempts to thwart off the violence that he thought was wrong were unwanted and went unrecognized. On the occasion that Brazil became upset about something, violence was the only coping mechanism that he had. He simply was not aware of anything else.

Andrew Garcia and Marcus Johnson were hunters. They had been taught very early on in life that normal rules don't apply to hunters; that hunters can attack fair game at any time. Although hunting is acceptable and welcomed in many parts of the country, we must question the most appropriate age at which children

should be exposed to hunting. We submit that Andrew and Marcus were not mature enough to be allotted as much freedom around guns as they were. These boys thought it would be fun to see what would happen if they opened fire on a crowd of teachers and fellow classmates. To them, it was a game. Clearly, they did not have the proper education about guns and hunting that would have enabled them to know that the taking of human life is not only wrong, but very different from hunting animals for food.

We have found that there are similarities in almost all of the school shooters. There are also differences. They are not all loners. They are not all abused children. Anger is the most common thread. Access to guns is universal.

In hindsight, the warning signs come together to form a more complete portrait of the shooter. But in the present, how do we quantify and qualify the traits and actions of these students? The warning signs were all there. Individually, as parents, friends, teachers, police, courts, doctors and social workers, we know something about the feelings or behaviors of these young people, but how do we put it together? The answer is simple enough: we need to develop a mechanism for pooling the information and sharing that information. The discipline of public health offers us a solution: surveillance and data sharing. Surveillance can be carried out on a daily basis in our basic interactions with students. A 2000 study conducted by researchers from the U. S. Secret Service offers some key insight. "In their own words, the boys who have killed in America's schools offer a simple suggestion to prevent it from happening again: Listen to us." How do we develop the wisdom to determine which child will go on to act out in violence and direct our limited resources to preventing that future action? The wisdom comes in learning how to recognize the warning signs and building on the information you have. Wisdom also comes in extending the information we have individually to our constituents, addressing the barriers to sharing it, understanding each other and acting together for the good of the community. Data sharing, perhaps via a confidential databank, among stakeholders will continually provide more information upon which to build.

Communication is a key factor in preventing these tragedies. It is a well known fact that many of these young killers often tell their friends of their plans prior to carrying them out. Therefore, fellow students sometimes know that something could happen. These students need teaching and support so that they will feel comfortable revealing their information to parents and authorities. Those students who come forth will also need respect, confidentiality and appreciation. Their information must be valued and then evaluated, rather than filed away, buried or ignored.

We need a process for tying all of these traits together without stereotyping a significant percentage of lonely high school students. Many students will have learning problems, insecurities and feel alone until they move through the teen-age years and out of the school environment. Many will overcome the challenges of adolescence and move on to brighter lives that stereotyping could make difficult.

We can't change their ages, but we can change their environments. We need to teach these students to cope within their climactic and unstable environments. For vulnerable students, spending seven hours a day, five days a week for years in a perceived hostile and non-supportive environment can prove disastrous for these students and the communities in which they live. Even for students who don't become violent in school, environmental changes could help many to develop better self esteem and be less prone to anger and violence in other areas of their lives.

Violence in the Nation- A call to Public Health

Violence is not a new phenomenon in our nation. Recent examinations of community response, social responsibility and societal cost to violence have allowed prevention practitioners and communities to reexamine our approach to violence. Indeed violence is a global issue but for the United States, violence would seem epidemic. The U.S. homicide rate is three to eight times greater than that of any other Western democracy. According to the Center for the Study and Prevention of Violence, intentional violence accounts for one-third of all injury in the United States and intentional interpersonal violence disproportionately involves young people as predators and victims. Furthermore, homicide is the second leading cause of death for youth ages 15 to 24.

School violence is often at the center of discussion when examining youth violence trends. School violence is not limited to urban areas. On the contrary in 1998, 12 through 18 year old students in urban, suburban and rural locales were equally vulnerable to serious violent crime and theft at school. School violence often calls our attention to the relatively recent phenomenon known as "school shootings." And while these cases are seen as especially heinous and lend themselves well to the sensationalism of media, in examining violence in the lives of our youth, we must also keep in mind that more youth victimization happens away from school than at school. Violence is a societal issue that like water, finds its way into all corners of our lives.

The news isn't all bad. According to the Department of Justice's Bureau of Justice and Statistics, violent crime and victimization rates have declined since 1993, reaching the lowest level ever recorded in 2000. Likewise, public health officials have taken notice. *Youth Violence: A Report of the Surgeon General* was developed by the CDC, the National Institutes of Health and the Substance Abuse and Mental Health Services Administration. The report defines the problem, using surveillance processes designed to gather data that establishes the nature of the problem and the trends in its incidence and prevalence; identifies potential causes through epidemiological analyses that identify risk and protective factors associated with the problem; designs, develops, and evaluates the effectiveness and generalizability of interventions; and disseminates successful models as part of a coordinated effort to educate and reach out to the public. Public health constituents have the opportunity to examine violence and specifically youth violence at a community health level, using both integrated models and community strategies to develop violence prevention practices.

Current public health anti-violence programs often limit their scope and resources to victims of domestic violence and abused children. While these prevention and intervention programs are crucial, we must begin to examine the wider scope of violence in society. Of concern in this examination is violence prevention focused on adolescent males and adult males who are both the perpetrators and victims of the majority of violent acts in the United States.

Public health methods are essential to violence prevention. Public health practice is both systematic and concerned with the discovery, examination, perpetuation and the root cause of disease. Public health at its core can be described as "changing behavior and changing attitudes through intervention as the base of prevention." Therefore, the nature of violence to permeate our communities and degrade both community health and well-being requires a systematic response.

The public health leaders of Redtown's special commission on youth violence in schools reviewed much material, interviewed many experts, and came up with many questions. Their unanimous response to these questions is that Redtown will develop public health policy to prevent violence in schools.

Study Guide Questions

1. In your group, discuss the similarities and differences in the school shooters in these three cases.
2. What are some of the missed opportunities raised in these cases?
3. Discuss the impact of the following on these cases:
 - a. Parents
 - b. Drugs
 - c. Availability of weapons
 - d. Past violent behavior/tendencies
 - e. Bullying at school
 - f. Exposure to violence in the home
 - g. Exposure to violent video games
4. What role should public health have in school-based violence prevention programs?
5. Discuss the various jurisdictions involved and how they could work together to develop a prevention program (criminal law, the school administration, public health, parents/teachers groups, neighborhood coalitions against violence).
6. Researchers from the US Secret Service studied thirty seven school shootings. Of the forty school shooters interviewed, they all offered the same suggestion for prevention of school gun violence: "Listen to us". Discuss ideas for how prevention programs can provide avenues for those contemplating violence to express their feelings, free of punishment.
7. Discuss ways that public health practitioners can use tools such as surveillance and data sharing to hone in on warning signs before tragedy strikes.

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