Sources of Help for Dating Violence Victims: A Qualitative Inquiry Into the Perceptions of African American Teens

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Abstract
Although teen dating violence victims’ reticence in seeking help from adults is well documented, little is known about youths’ comparative perceptions of the types of help offered by and effectiveness of various sources. This qualitative study solicited teens’ perceptions of sources of help for victims using in-depth interviews with African American youth (ages 13-18) in two public high schools in New Orleans (N = 38). Participants were recruited purposively by researchers during lunchtime and via referral by school personnel. Interviews were transcribed verbatim and coded independently by two study team members. Thematic content analyses were conducted. Teens reported that victims were most likely to seek help from friends, who were largely expected to provide advice and comfort. Nearly half reported...
that teens would be likely to seek help from family, who would provide more active responses to dating violence (i.e., reporting to authorities, confronting the abuser). Fewer respondents believed teens would seek help from other adults, such as school personnel, who were also perceived as likely to enlist outside authorities. Fears about lack of confidentiality and over-reaction were the main perceived barriers to accessing help from adults. Furthermore, although respondents believed teens would be less likely to seek help from adults, adults were perceived as more effective at stopping abuse compared with peers. Interventions that train peer helpers, explain confidentiality to teens, increase school personnel’s ability to provide confidential counseling, and promote use of health services may improve access to help for teen dating violence victims.

Keywords
dating violence, school, parents, help-seeking, African American, adolescents, victims’ services, intimate partner violence

Introduction
Approximately 10% of U.S. high school students reported physical dating violence victimization in 2013 (Kann et al., 2014). Psychological/emotional victimization prevalence is estimated to be even higher, approximately 24% among 10th graders nationally (Haynie et al., 2013). In New Orleans, physical dating violence prevalence is more than twice the national rates (Madkour, Johnson, Clum, & Brown, 2011). The consequences of dating violence include injury, depression, sexually transmitted infections, substance use, and continued partner violence into later life (Banyard & Cross, 2008; Silverman, Raj, Mucci, & Hathaway, 2001; Smith, White, & Holland, 2003). As such, dating violence has been recognized as a public health priority.

There are important gender and racial differences in the prevalence, predictors, and consequences of adolescent dating violence. Although adolescent women report perpetrating physical dating violence at higher rates than males (Haynie et al., 2013), males are more likely to perpetrate more severe forms of physical aggression, and female victims are more likely than male victims to report feeling fear and sustain injury as a result of victimization (Foshee, 1996; Molidor & Tolman, 1998). Minority populations, specifically African Americans, may be particularly at risk for dating violence (Henry & Zeytinoglu, 2012), with dating violence rates reported up to 40% in some studies. However, this has not been consistent across adolescent samples.
(Amstadter et al., 2011; Renner & Whitney, 2010), and some research suggests this may be due to lower socioeconomic status or increased exposure to violence in the home and community of African American youth compared with others (Henry & Zeytinoglu, 2012; Malik, Sorenson, & Aneshensel, 1997; Rennison & Planty, 2003). Differences between ethnic groups in destructive communication skills, acceptance of dating abuse, and gender stereotyping have also been found to partially explain this increased risk (Foshee et al., 2008). Research suggests the relative importance of risk factors in dating violence etiology varies by ethnic group, due to cultural differences and differential exposure to contextual risk factors (Offenhauer & Buchalter, 2011).

Most teen dating violence victims do not seek help, but when they do, they are more likely to disclose to friends and family than to professionals (Ashley & Foshee, 2005; Martin, Houston, Mmari, & Decker, 2012; Ocampo, Shelley, & Jaycox, 2007). In one study, factors influencing help-seeking included someone seeing the violence and the victim attaching anger/jealousy to the incident (Black, Tolman, Callahan, Saunders, & Weisz, 2008). In another study specifically of African American youth, higher severity of dating violence was associated with increased intention to seek help (Black & Weisz, 2003). Research suggests that males are less likely to seek help for dating violence victimization than females; however, this sex difference was not found among African American teens (Watson, Cascardi, Avery-Leaf, & O’Leary, 2001).

Literature exploring types of help offered by others, as well as teens’ barriers to help-seeking, is somewhat sparse. In one Midwestern study, the most common response from helpers (helpers not differentiated) was nurturing, although avoidance and minimization were also common (Weisz, Tolman, Callahan, Saunders, & Black, 2007). Helpers’ response was found to vary by the severity of the violence experienced by the teen, although male teens were more likely than females to have their dating problems minimized by their helpers. In a study among Latino youth, respondents reported they were unlikely to seek help from health professionals due to lack of trust, but that the quality of help offered by friends was limited (Ocampo et al., 2007). In a study of youth in New Zealand, barriers to seeking help from professionals included concerns about confidentiality, lack of trust, and embarrassment (Jackson, 2002).

Although these studies describe some aspects of teen dating violence victims’ help-seeking behavior, a number of gaps in understanding remain. First, very few studies focus on the help-seeking behaviors of African American teens, including their expected responses from helpers, despite their possible increased risk for teen dating violence. Second, no study has asked systematically what types of help are offered across sources, as well as the perceived
efficacy of that help. Knowledge of the range of sources and responses, and teens’ perceptions of their efficacy, is important in understanding adolescents’ help-seeking behavior. Our study aims were (a) to assess African American teens’ likely sources of help if experiencing dating violence, including expected responses and efficacy of the help provided, and (b) to explore barriers to African American teens’ accessing help from school-based professionals. Our second focus on school-based professionals arose from a desire to inform school-based interventions, which may efficiently reach a large proportion of teens. We focused on urban African American youth in particular given literature suggesting their potential increased vulnerability to dating violence (Henry & Zeytinoglu, 2012), and the scant literature documenting their help-seeking behaviors.

Method

Participant Recruitment

Data come from a qualitative study in New Orleans. Two public charter high schools (Grades 9-12), which accept students from anywhere within the city, agreed to be recruitment sites. One high school had a general high school curriculum and a large student body ($n = 864$); the other had a curriculum focused on science and mathematics, and a medium-sized student body ($n = 373$). Both high schools had a school-based health center (SBHC) and served predominantly African American students from lower to middle socioeconomic status. Participants eligible for the study were between the ages of 13 and 18 years, self-identified as African American, and attended the schools where recruitment took place. Participants were not required to have been a victim or perpetrator of dating violence.

Recruitment was carried out in the 2013-2014 academic year. A study research assistant set up a recruitment table during lunchtime at each of the schools and provided information about the study to interested students. Also, school personnel in one of the schools directly referred students to the study. If the student was below age 18, written parental permission and written student assent were obtained. If the student was 18 years of age, written consent was obtained. The target sample size was 40 students, so that the sample would include 10 males and 10 females from each school. Thirty-eight students were recruited, with the smaller school having eight instead of 10 male participants. The majority of participants were 17 ($n = 14$) or 18 ($n = 22$) years of age. All study procedures were reviewed and approved by the Tulane University Social-Behavioral Institutional Review Board.
Data Collection

Individual in-depth interviews were conducted. After the research assistant received the consent/assent/permission form(s), she scheduled an interview time with the student. Interviews were conducted by the study principal investigator (PI) or the research assistant in a private room onsite at the student’s school. Permission was obtained from each student (and parent, when below 18) to audiorecord the interview. Interviews lasted approximately 1 hr. Interviews began by informing the interviewee of the interviewer’s mandated reporting requirements. The interviews followed a semi-structured format, with questions that explored students’ opinions and perceptions. Students were not required to directly report their own experiences but were encouraged to think of their own or friends’ experiences when responding. At the end of the interview, all participants were provided with a list of resources for dating violence victims, and a US$10 Wal-Mart gift card.

Interview Content

Interviews covered a variety of topical areas related to dating violence (definitions, risk factors/etiology, existing sources of help for dating violence victims, and desired features for a future dating violence prevention program). All participants were asked the following questions related to potential sources of help:

1. Who do youth go to for help when they are a victim?
2. How do those people help victims?
3. How effective is that help?
4. If asked by a doctor, nurse, or social worker at the SBHC about dating violence, would youth answer truthfully?

The interviewer was permitted to rephrase and probe further to gain detail and enhance respondent understanding. Teens were not directly asked whether they had been a perpetrator or victim of teen dating violence.

Data Analysis

Interviews were audiotaped and transcribed verbatim. Name-identifying information was deleted from the transcriptions, which were identified with a unique research identification number (RIN). The PI reviewed all recordings to ensure adherence to the interview guide. Password-protected NVivo software was used for data management and analyses. Transcriptions were
analyzed for emergent themes using a data-driven thematic coding scheme that was iteratively developed by the analytic team under the guidance of a senior qualitative methodologist (Corbin & Strauss, 1990; Strauss & Corbin, 1994). Decision trails were documented. Coding was conducted by two study team members. Discrepant codes were discussed and resolved. Regular team meetings were held to discuss new thematic categories or codes that emerged in the data, as well as any issues related to quality assurance and inter-rater reliability. Beyond direct evaluation of the questions of interest described earlier, differences in responses according to respondent’s sex, as well as their school, were explored. Differences across these analyses are described in the “Results” section if identified.

We organized the findings by the sources of help teens reported when asked in an open-ended question. Teens were almost unanimously giving perceptions of sources of help for female victims of male-perpetrated physical violence, and less so of other forms of violence. We begin by presenting reasons why some respondents reported they would go to no one for help. We then reviewed the three major potential sources of help reported by teens (peers, family members, and other adults). Included in each are teens’ thoughts on how such sources help dating violence victims and their perceived effectiveness. Within the section on adults other than parents or family members, we also report teens’ responses to more directed questions about SBHC staff.

**Results**

**No One**

About one fourth (24%) of participants said that teens would not seek help from anyone. Respondents stated that teens might think that they could handle the situation on their own. Respondents also believed that some teens would not want others “in their business.” A respondent described her perception that outsiders cannot help teens because they do not understand private and personal relationships:

I think they try to handle it on their own ‘cause they feel like y’all need to mind your business, that’s what I think. Like if people try to help them they just be like you don’t understand our relationship, so stay out of it. We can fix this on our own.

Another reason was teens’ fear of unwanted responses. Unwanted responses from family most often were described as overreaction. Teens
feared their family seeking retribution, or forbidding them from seeing their (abusive) significant other. Unwanted responses from friends were mostly judgment or reproach. A female respondent said she would not want to tell her friends about dating violence because “her friends might make her feel stupid for letting something like this happen.” A male respondent described unwanted reactions from friends in this way:

Well some friends would probably help but I think some friends would say, “Why are you so stupid? Why did you do that?” . . . I think that’s why some people don’t go to anyone for help because it’s like people are so judgmental with those types of situations. They say “leave!” but in those types of situations it’s hard to leave.

A prominent fear was the worry that an adult would involve outside authorities. Several respondents described teens’ reluctance to disclose dating violence because they feared unwanted scrutiny or reprimand by external agencies:

I don’t know if they go to anyone, hopefully they do . . . I guess they would go to the counselor . . . and nine times out of ten, they would have to report it if it’s physical or mental, and a lot of times girls won’t want that, anyone guys or girls, don’t want their relationships to be reported. Who wants their girlfriend or boyfriend to be reported if they hit them? So they probably will keep it a secret.

Some respondents felt that the reason teens do not disclose dating violence is because they feel that there is no one available to disclose to:

I don’t think they would go to anyone for help . . . they may not have a support system at all, but if they were to go to for help I think, I don’t know. I don’t think that . . . I think that a mother maybe, or friend, but they probably won’t do much.

This respondent demonstrated not only that some teens do not feel that they have resources in their lives to help with dating violence but also that the people and resources who are available might not be able to effectively aid in the situation.

**Friends**

Seventy-six percent of respondents said that teens would seek help from friends when experiencing dating violence. For these respondents, friends
were a primary source of help because they were approachable, empathetic, and non-judgmental; they would maintain privacy; and possibly they lacked authority (or a mandate) to take action. Said one respondent, “You should go to your parents but I think you should go to your friends more than your parents because it’s easier to talk to them about situations like that.” Another respondent stated, “I think so ’cause that’s their peers. Some parents, they may not know. Or they [sic] child wouldn’t want their parents to know ’cause that could affect the parents too. Things that I didn’t want to happen, happened.”

When asked how friends help, most respondents mentioned multiple responses. The majority of respondents said that friends help by giving advice or comfort. Fewer respondents said that friends would help by telling an adult or confronting the abuser. When asked how effective friends’ help was for dating violence victims, mixed opinions were apparent. Respondents expressed an understanding that seeking help from friends likely would not alleviate abuse, but that it was still comforting to talk to a confidant who would not expose the dating violence situation to others (especially adults).

**Family**

Nearly half of the respondents (43%) said that teens would also seek help from family when experiencing dating violence. Respondents were more likely to expect active responses from family compared with friends. Five respondents reported that family would help by involving the criminal justice system (i.e., going to the police or getting a restraining order), and seven respondents said that family would help by retaliating against the abuser and/or his or her family:

> Because if you’re explaining to your family this is happening, your family might be like “No! We ain’t having that!” They’ll take it in their own hands instead of letting you deal with it, instead of letting you go about it in the way you see it. Instead of giving their advice, they want to act on it.

However, similar to responses by friends, a number of respondents also said a family’s main response would be to give advice. One respondent said,

> I mean [family] talk[s] to them. They give them some solution to their problems. They see what you’re doing wrong. It’s not always the person sometimes you have . . . So they like practically break it down into pieces and [tell you] how to stop it from getting even worse.

When asked about how effective family responses would be, respondents said it depended on the situation. Respondents believed that teens could
receive a more effective response from family or other adults compared with from a peer. For example, a respondent stated,

[ Friends help] a little, but I mean, things seem better coming from your peers, but it’s not always better because they might be in the same situation as you, and they don’t have much life experience to get you through certain things. Your parents, or an older person, probably went through that same stuff.

In addition to providing comfort, advice, and sympathy, respondents said family members would have wisdom and experience with relationships. However, disclosure usually depended on the level of comfort and trust with a specific family member. For example, one respondent described seeking help from family as follows:

Yea your mother, your grandmother, someone that has a lot of wisdom . . . if you are a comfortable person you will go to someone in your family . . . I consider my mom my best friend but I still respect her as my mother and I can still go to her for anything, same thing with my father, I can go to him for anything.

However, some respondents said teens might be reluctant to go to family members due to the power such family members would subsequently have over their relationship, and the expectations family members had of teens. This influence could make a teenager reluctant to tell even close family members about dating violence. One female respondent talked about not wanting to disappoint her parents:

Because your parents, they have more control over what you do. They might overreact and say you can never see them ever again. Teens my age are always worried about what their parents may think of them, after something happens.

Other respondents described reluctance to go to family members because they are not relatable or do not understand. For example, one respondent said, “They talk to you, but sometimes they don’t understand what you are going through.” Alternately, teens may simply not have a positive relationship with family members. For example, one respondent said, “I ain’t close to none of my family members. I will communicate, you know, we’ll talk or go places, but I don’t have a person where I look up to or a person I could be around.”

Other Adults

Only a fourth (26%) of respondents spontaneously mentioned teachers, counselors, or other adults as a source of help. Several respondents expressed an
understanding that outside authority figures are the sources teens are “supposed” to go to for help with dating violence, but they were still reluctant to tell these people either due to comfort level or being unsure about what teachers, counselors, or other adults would do in response to the dating violence situation. One participant stated, “I don’t know the exact steps that [teachers or counselors] take because I haven’t been, but I am sure that they will do anything and everything in their willpower to get that child help.”

That being said, respondents felt like adults would want to support teens if they could. One respondent said that adults might respond to teen dating violence by saying “If you don’t want me to go to authorities I won’t, but I will help you with the situation. Or if you do [want me to go to authorities], I will make sure it doesn’t happen again.” The respondent felt like this support allowed students to understand that adults want teens to know they were there for them and would support them.

We then asked respondents a directed question about whether teens would disclose dating violence to health professionals at the SBHC within their high schools. Most respondents said teens would not feel comfortable disclosing abuse. Major barriers to disclosure were teens’ concerns about confidentiality and SBHC staff getting outside authorities and/or parents involved. One respondent described teens’ discomfort with disclosing to the SBHC staff because “they wouldn’t want . . . either they wouldn’t want the person to get in trouble or they wouldn’t want their parents to get involved or know what’s going on.” Another respondent stated that she would talk to the SBHC if she were experiencing dating violence “as long as it’s anonymous.” Even though this respondent was willing to disclose dating violence to a health professional, disclosure still hinged upon discretion and confidentiality. Respondents were fearful of the consequences of telling a health care professional about violence. Similar to respondents’ reluctance to disclose dating violence to family or other adults, the teens were fearful about getting the police or other outside authorities involved:

No, because they, that teacher or that person, is required to go tell what’s going on. Like I said, most teens, if they wanted you to know, you would know. So they not gonna to say anything.

Respondents also expressed teens not feeling comfortable talking to strangers about abusive relationships:

Because some of them don’t express their feelings. They are gonna be like, “I don’t think that’s none of your business,” that’s what they are thinking in their head . . . You don’t really know this person, “why do I have to tell this person, I don’t have to tell him these questions.”
Because the SBHC is a part of the high school, students expressed concern about the social ramifications from their peers finding out about dating violence experiences. Despite the convenience, respondents expressed that the SBHC might not have the confidential, professional environment that an outside clinic would have:

With a lot of students, I think you need to let them know that “I’m not gonna go back and tell nobody this. I’m a counselor. I’m just somebody to talk to.” But if you’ve been getting abused or something . . . of course they’re gonna go downstairs and tell and too many people start to find out.

The minority of respondents who reported some teens might be willing to talk about dating violence to SBHC staff stated that the level of comfort and trust with the SBHC staff member was the most important determinant of disclosure. A student stated, “If they feel comfortable with the person, then yeah, [they will disclose]. That goes back to just having someone who can actually talk to you.” Comfort in disclosure to these staff members came in large part from feeling that they would not disclose what the teen was telling them to their peers in the school, other school staff, or outside authorities (including parents). Respondents in this group expressed the concern that they would not want their peers or other members of the school community to find out about their personal experiences with dating violence because of fear of gossip, judgment, or escalation.

Discussion

Past studies have found that teens are reticent in seeking help when they are dating violence victims, but that when they do, they often go to friends (Ashley & Foshee, 2005; Martin et al., 2012; Ocampo et al., 2007). Our study supports that finding and suggests potential barriers to help-seeking from adults. Participants’ primary concern about disclosing to adults was that some outside authority may be called upon, which could end their relationship and/or get their partner in trouble. Such findings are in agreement with past studies among teens (Jackson, 2002; Ocampo et al., 2007), as well as results in the adult intimate partner violence (IPV) literature (Fugate, Landis, Riordan, Naureckas, & Engel, 2005). Although respondents reported that teens would be more likely to seek help from adults when dating violence became more “serious” (which to them meant more serious physical violence), this delay reduces the possibility of adults helping before dating violence escalates to injuries or other serious consequences.

Also, similar to past research (Weisz et al., 2007), teens expected the most common response by both friends and family would be comfort and advice.
However, participants also reported that family members would be more likely than friends to have active responses (i.e., seeking retribution, demanding an end to the relationship, or getting authorities involved). Like the participants in a study among Latino youth (Ocampo et al., 2007), respondents acknowledged that peers may be less effective in stopping abuse than family members. This was because peers were seen as less experienced in intimate relationships, and because peers were less likely than family members to leverage outside resources. Thus, although participants acknowledged that family members would be more effective, this (often) would not be enough to overcome barriers to accessing such help.

Barriers to reporting dating violence to staff at SBHCs were similar to those for family members—respondents’ desire to keep outsiders uninvolved. Respondents also expressed lack of trust in staff members, including fear they would gossip about students to other people within the school. Relieving teens’ concerns about involving outside authorities in their relationships is complicated, given mandatory reporting requirements of professionals working with minor teens. However, increasing teens’ knowledge about what can remain confidential will be an important first step toward building teens’ trust in service providers. This includes alleviating fears about gossip to other school staff. Teens’ perceptions of what actions count as dating violence potentially limit their access to effective sources of help (i.e., professionals or other adults). As noted above, when reporting about help-seeking behaviors, teens were largely discussing help-seeking for physical violence in dating relationships. After physical violence has started, professionals are bound by mandatory reporting requirements to get outsiders involved. It is possible that if teens were more educated about other forms of abuse that often precede physical violence (i.e., verbal abuse and controlling behavior), they could access confidential help from effective sources and prevent escalation to physical violence. Given the barriers cited by participants, and a significant proportion of youth not recognizing non-physical forms of dating violence, increasing the availability of peer or bystander education may be the most effective way to improve teen dating violence victims’ access to help. Such education could train youth about dating violence warning signs, sensitive ways to discuss dating violence with friends, and helping friends feel more comfortable seeking help from adults before dating violence escalates to physical abuse. Some existing evidence-based curricula already include education on such topics (e.g., Safe Dates; Foshee et al., 1998), so wider spread implementation of such curricula may be warranted.

Additional training for school counselors and health care providers may also be warranted. In a study of female IPV victims in three different types of health care settings, Liebschutz et al. (2008) found that when victims reported
IPV to professionals, no actual harm came from disclosing abuse to health care professionals. However, clinicians were most beneficial to survivors of abuse when they built a therapeutic and respectful relationship with the victim that did not demand disclosure. Beneficial encounters with these formal sources of help were based on familiarity with the clinician, respectful acknowledgment of the abuse, and relevant referrals. Thus, further training for school personnel (including SBHC clinicians) about what can and cannot remain confidential, as well as trainings on sensitive interactions with teens on these topics, may also help increase teen’ access to help.

Interestingly, across all questions included, there were no noted differences between female and male participants in responses to likely sources of help, perceived efficacy of that help, or potential barriers for seeking help from that source. This concurs with one prior study which found no gender differences among African Americans in help-seeking behaviors for dating violence (Watson et al., 2001). However, such lack of differences in our study may be due to both male and female respondents’ similar definitions of what constitutes dating violence. Results from an earlier section of the interview suggest respondents largely perceived “dating violence” to mean male-perpetrated physical or sexual acts against a female. Thus, when responding to hypothetical help-seeking questions, both male and female participants have a female victim of physical or sexual abuse in mind. Further research that more carefully separates responses of male victims versus female victims may help clarify our findings.

Study Limitations

First, we included a convenience sample of African American teens from two high schools in one city. Therefore, responses may not be representative of the wider city population of teens, or teens nationwide. However, given the agreement between our study findings and studies of youth with different backgrounds (i.e., Midwestern teens, teens from New Zealand, Latino teens), this suggests some agreement between subpopulations of teens on these subjects. Second, we conducted a brief 1-hr interview, which allowed little time to establish rapport. Third, the interviewer for the study was not African American, so it is possible that participants were not comfortable sharing racial factors affecting victims’ help-seeking (i.e., if perceived racial bias affected teens’ seeking help from SBHC staff). Fourth, no participants reported direct experience of dating violence as either a victim or perpetrator, and therefore may not represent the perspectives of teens directly involved in dating violence. However, our informing participants at the beginning of the interview about our mandatory reporting requirements may have affected
their willingness to disclose their involvement. Therefore, victims and/or perpetrators may be included in our sample but not identified. Finally, all questions in our interview were framed to address dating violence in opposite-sex relationships. Given how questions were worded, responses may not have captured the different experiences of sexual minority couples. These teens may face additional barriers to help-seeking, including parents or other adults who are not comfortable addressing sexual minority dating issues.

In summary, although teens value the support friends can provide dating violence victims, access to more effective adult sources of help is limited due to teens’ fears about lack of confidentiality. Training teens in recognizing abuse before it escalates to physical violence, educating them about health professionals’ confidentiality requirements, and providing peer-based interventions may be the best way of reaching teen victims of dating violence. There are obviously also issues surrounding mandatory reporting. Although such mandatory reporting was implemented to be helpful and ensure abused minors received the help they need, such laws also appear to impede teens accessing the most effective sources of help. Interventions should explore ways to give counselors more leeway in discussing dating violence with teens, so physical abuse victims receive more timely help.

Acknowledgments
The authors thank the school administrators, school staff, and the students themselves for sharing their time and experiences with them.

Authors’ Note
A prior version of this work was presented at the American Public Health Association Annual Meeting in 2014.

Declaration of Conflicting Interests
The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Funding
The author(s) disclosed receipt of the following financial support for the research, authorship, and/or publication of this article: Funding for this work was provided by the Committee on Research at Tulane University.

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