

“IT'S ALL COUNTRY BOYS:” RURAL YOUNG MALE PERCEPTIONS OF RISK &
PROTECTIVE FACTORS FOR DATING VIOLENCE AND TECHNOLOGY-BASED
INTERVENTIONS AS AN ACCEPTABLE RESPONSE

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Doctor of Philosophy

by

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The undersigned, appointed by the dean of the Graduate School, have examined the
dissertation entitled

“IT'S ALL COUNTRY BOYS.” RURAL YOUNG MALE PERCEPTIONS OF RISK &
PROTECTIVE FACTORS FOR DATING VIOLENCE AND DIGITAL INTERVENTIONS AS
AN ACCEPTABLE RESPONSE

presented by Chuka Nestor Emezue,

a candidate for the degree of Doctor of Philosophy of Nursing,

and hereby certify that, in their opinion, it is worthy of acceptance.

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Professor Maithe Enriquez

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DEDICATION

To Edith Nkechi Emezue.

My gone light.

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“IT'S ALL COUNTRY BOYS:” RURAL YOUNG MALE PERCEPTIONS OF RISK &
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Dr. Linda Bullock & Dr. Tina Bloom, Dissertation Advisors

ABSTRACT

In 2019, one in eight US teens reported experiencing Teen Dating Violence (TDV) as physical, psychological, sexual, and online abuse. Studies show rural youth report up to twice the physical violence rates of urban youth but remain grossly undersampled and understudied, particularly rural young males. The Health-*e* BROs! Study (*Better & Healthy Relationship Outcomes*) was designed to begin to address this gap. An understudied aspect of dating violence prevention is young people's perception and communication of risks associated with TDV victimization and perpetration. Overall, 14 rural young males participated in three online focus groups, and another 13 completed phone interviews stratified by age - 15-17 (middle adolescents) and 18-24 (emerging adults). In this dissertation, two specific aims were addressed using distinct analytical approaches. First, using an interpretive and dialectical approach grounded in relational dialectics theory (RDT), this study explored TDV risk communication and risk perceptions among rural young males (ages 15-24). Our interpretive analysis identified two main themes of risk and protection dialectics: (1) *Dialectics of Social Tensions* and (2) *Dialectics of Help-Seeking & Help-Giving*. Within each main theme, constitutive sub-themes are described as dialectics accompanied by participant quotes. Dialectical tensions and contradictions were used as a heuristic framework. Our second aim investigated: (a) what rural male youth consider useful content, resources, and features in app-based dating violence prevention intervention and (b) unmet needs related to barriers and facilitators for using this type of intervention in rural contexts. The Unified Theory of Acceptance and Use of Technology (UTAUT) guided the second aim, and a qualitative descriptive approach was used to analyze this aim. Findings bear

implications for advocates and practitioners working with rural youth in planning developmentally and culturally appropriate anti-TDV programs and will yield intervention, policy, and for researchers by providing a broader framework for the development of theory and effective violence prevention practice in low-income, rural contexts.

CHAPTER I: INTRODUCTION

“It is easier to build strong children than to repair broken men.”

Frederick Douglass

BACKGROUND

Teen Dating Violence (or TDV) is considered an “old disease in a new world” (Murray & Azzinaro, 2019). Dating violence researchers have established that TDV involves a pattern of controlling or violent behaviors by a current or former dating partner, which can escalate into severe forms of physical, psychological, sexual violence, stalking, and cyber abuse – often co-occurring with other forms of violence (Basile et al., 2019). Dating violence is pervasive and classified as an area of Research Priority by the CDC Injury Center (Niolon et al., 2015).

According to the most recent CDC’s Youth Risk Behavior Surveillance System (YRBSS), one in eight US male and female youth report experienced physical dating violence (8.2%), sexual dating violence (8.2%), electronic bullying (15.7%), and bullying on school property (19.5%) based on past-year prevalence (Basile et al., 2019). Female and LGBT+ students are most often victimized (Basile et al., 2019), presenting TDV as not only a public health crisis but an equity issue with a higher burden disproportionately impacting society's most oppressed and underserved youth groups. Studies also show distinctions in prevalence, with the highest prevalence of TDV occurring in 12th grade; and among American Indian or Alaska Native youth (Kann et al., 2018). Furthermore, the dynamics of TDV perpetration and victimization also vary by gender. More girls than boys report perpetrating verbal and physical assault, and more boys report sexual and physical abuse toward dating partners (Niolon et al., 2015; Vagi et al., 2015). Dating violence researchers have established that the highest exposure to TDV occurs between age 16-18 (Breiding et al., 2014; Foshee et al., 2014). Females aged 16 to 18 are three times more likely to be victims of TDV, with dating abuse starting as early as the sixth grade (Decker & Silverman, 2005; Foshee et al., 2012). For many, their first experience of dating violence occurs in dating or casual relationships/hook-up with a current or

ex-partner (Glass et al., 2017). Whereas two-thirds of studies use conveniently sampled youth (Exner-Cortens et al., 2016), evidence locates the highest risk with racial, sexual, and gender minority youth (Black et al., 2014; Foshee, McNaughton Reyes, & Ennett, 2010).

TDV is associated with a variety of negative consequences that vary by sociodemographic category, transcending gender, ethnicity/racial, class, capacity, religious, geographic, sexual orientation, and cultural, demographic divides (i.e., urban vs. rural) (Kann et al., 2018). These negative effects include deviant gang involvement, risky sexual behaviors (Shorey et al., 2015), early initiation of chemical dependence (Eaton, Davis, Barrios, Brener, & Noonan, 2007), unintended teen pregnancy, bullying, suicidality, health risk behaviors, eating disorders (e.g., maladaptive dieting), and eating disorders (e.g., using diet pills for weight loss) (Coker et al., 2014; Miller-Perrin, Perrin, & Renzetti, 2017). These outcomes lead to lasting psychological consequences such as depression, post-traumatic stress disorder, and suicidal ideation (Murray & Azzinaro, 2019). TDV has been consistently associated with poor academic performance, with 20% of TDV-involved youth getting no better than C grades in school (CDC, 2010). Importantly, TDV is also strongly associated with future violence (Miller-Perrin et al., 2017; Pensak, 2015). Unchecked, the adverse effects of TDV last into adulthood when victimization and perpetration are harder to manage - making early prevention a strategic priority. By promoting healthy relationships at a young age, we mitigate later abuse and victimization – a more complex undertaking (O'Leary, Malone, & Tyree, 1994).

A 2018 review by the Community Preventive Services Task Force (CPSTF) identified evidence gaps in the TDV literature with rural youth. Specifically, the lack of evidence on age-appropriate and tested interventions with low-income rural youth. Rural adolescents and young adults – are the focus of this study and are defined as youth ages 15-24. Rural youth report near twice the prevalence rate of physical dating violence and twice the risk of general TDV compared to urban youth but remain understudied in the dating violence literature (Martz, Jameson, & Page, 2016; Marquart et al., 2007; McDonnell, Ott, & Mitchell, 2010; Spencer & Bryant, 2000; Vézina & Hébert,

2007). In a regional study of dating violence, Spencer and Bryant (2000) report the highest TDV rates among young males living in rural areas (18%) compared to males in urban (9%) and suburban (9%) locations (Spencer & Bryant, 2000). The same was found for rural female youth (14%), compared with urban (6%) and suburban (8%) peers (Spencer & Bryant, 2000). Rurality is compounded by poverty (Edwards et al., 2014; Lanier & Maume, 2009; Martz, Jameson, & Page, 2016) and by fragmented support services, shortage of trained professionals, high social cohesion (threatening confidential anti-TDV services), and psychosocial factors (e.g., restrictive gender norms, patriarchal ideologies) (Martz, Jameson, & Page, 2016; McDonell, Ott, & Mitchell, 2010).

The majority of TDV studies are non-representative, concentrating on adult and cisgender female survivors or overrecruiting heterosexual, urban, middle-class, white teenagers (Alleyne-Green, Coleman-Cowger, & Henry, 2012; Debnam & Kumodzi, 2019; Exner-Cortens et al., 2016). Prevalence studies suggest boys and girls reporting equal levels of victimization for some forms of violence (Breiding et al., 2014).

Notably, mixed-gender samples may be prone to confounding social desirability response bias (i.e., overreporting of socially acceptable behaviors and underreporting of unacceptable behaviors) (Dalton & Ortegren, 2011). While mixed-gender dating violence studies show benefits for females and males (Flood, 2018), preliminary findings show in mixed-gender settings, young males are less involved and contribute less to group discussions (Flood, 2018). Young males are less inclined to talk about their abuse, even with male peers (Fallon & Bowles, 1999; Fry et al., 2014; Hébert, Moreau, Blais, Lavoie, & Guerrier, 2017; Pappas, 2019). Males and females have different attitudes toward aggression, with males showing more tolerance (Flood, 2018). Thus, in research spaces combining both groups, it may be challenging to combine strategies targeting different outlooks to TDV. In addition, males may be inclined to be reflexive on their own sexist and abusive histories in male-only settings or discuss their own experiences of abuse (p. 205). Male reinforcing attitudes and behaviors may play up in male-only groups and can be harnessed to enrich group discussions (Berkowitz, 2002; Flood, 2018). Admittedly, mixed-gender groups may be preferred by

youth (Elias-Lambert, Black, & Sharma, 2010). Mixed groups can foster cross-dialogue across gender and sexuality lines, creating opportunities for in-depth conversations to expose attitudes and beliefs that may be themed by gender, giving all participants a platform to challenge hegemonic and biased views (Flood, 2018).

All these issues are essential to note in anti-TDV work, hence the need for male-only gender-specific qualitative approaches that foreground the lived experiences and interpretive frames of how rural male youth at risk for being victims and perpetrators, or both. Moreover, this rural-specific study is a critical need often missed in mixed-gender dating violence research due to the low response-to-recruitment of males and the current focus on conveniently sample urban cohorts (Exner-Cortens et al., 2016; Flood, 2018). Rural male youth remain underrepresented in dating violence research, harder-to-reach, and less likely to participate in health-based studies (Flood, 2018).

Identifying modifiable risk and protective factors in rural male youth and selecting evidence-based youth-endorsed approaches to resolve them is the key to successful early prevention of TDV. Although the literature is growing, TDV researchers indicate that youth prefer interactive and tailored technology-based interventions to traditional in-person models (e.g., counseling and justice involvement) (Ranney, Choo, Spirito, & Mello, 2013). mHealth and eHealth platforms prioritize confidentiality, safety, personalized real-time access to confidential screening, and referral to treatment (Debnam & Kumodzi, 2019; Flood, 2018; Glass et al., 2017).

We must clarify how rural male youths will fare with individualizable technology-based relevant to rural teens. Questions remain about how to engage rural male youth using digital technologies and increase adoption and implementation of evidence-based health/behavioral health services among rural adolescents. Questions remain about how these issues enhance and challenge the acceptance and readiness to use emerging technology-based interventions to ameliorate TDV in rural contexts. This is particularly relevant in light of systemic obstacles to maximum use of traditional resources (e.g., transportation problems, lack of service providers), psychosocial barriers (e.g., codified societal norms on gender and help-seeking), behavioral factors (attitudes toward gender

equity, male entitlement), and community-level risk factors. These issues vary by regional contextual factors in what some call a 'rural culture' (Lanier & Maume, 2009).

Titled the Health-*e* BROS! Study (BROS: Better & Healthy Relationship Outcomes), this dissertation study triangulated qualitative data by integrating findings from focus groups and individual interviews. Results bear implications for advocates and practitioners working with rural youth in planning developmentally and culturally appropriate anti-TDV programs. Findings will also yield intervention, policy, and research-relevant knowledge by providing a broader framework for developing theory and effective violence prevention practice in low-income, rural contexts. As a result, this research adds to the body of knowledge on dating abuse and attempts to fill a crucial void.

Statement of the Problem

There is compelling evidence that male-specific services are groundbreaking in involving men and boys in violence reduction, ally development, and the dismantling of rigid gender stereotypes (Flood, 2018). However, gaps in the literature describe failing strategies to recruit rural young males to TDV studies. Rural dating violence will not decrease without focused attention to engage with rural male youth underrecruited to TDV intervention programs. Males are more likely than females to wield power and authority in dating relationships, and they are more likely to perpetrate serious psychological and sexual violence, as well as to be disbelieved if they have been abused themselves. From anecdotal findings, in mixed-gender settings, young males are also less involved in group discussions on sensitive topics. Overall, male survivors of TDV are considered hard to reach, unresponsive to dating violence research invitations, and are underrepresented at research sites (Hickman et al., 2004). Rural male youth survivors are an even more vulnerable group, as some rural anti-feminine cultures prohibit any show of *weakness* in person or character, and endorse constraining definitions of masculinity, thus restricting help-seeking (Gunnell & Martin, 2004; Kølves, Milner, McKay, & De Leo, 2012).

Furthermore, rural adolescents and young adults are twice at risk for TDV but understudied in dating violence research (McDonell, Ott, & Mitchell, 2010; Vézina & Hébert, 2007). Hence the

need for male-only focus groups and individual interviews with rural male youth. This information is rooted in intricate cultural and socioecological factors accessible by qualitative approaches. Consistent with this objective, this study yielded dating violence research, intervention, and policy-relevant evidence specific to adapting TDV technology-based interventions acceptable to low-income rural adolescent males.

Specific Aims

This study addressed the following research questions (key constructs are underlined*):

AIM 1: To identify rural young males' perceptions of risk and protective factors of dating violence in rural communities.

- RQ: What are their perceptions of risk factors for TDV?
- RQ: What are their perceptions of protective factors for TDV?
- RQ: What role does gender and masculinity play in promoting (or protecting from) TDV among rural males?

AIM 2: To explore young rural male acceptability and preferences for content, features, and functions expected in a TDV prevention technology-based intervention.

- RQ: What are the barriers and facilitators for the use and uptake of TDV technology-based interventions among rural males?
- RQ: What type of content and features would you like to see in a TDV technology-based intervention for rural males?

Purpose Statement

This dissertation undertakes two specific aims in response to these identified gaps and is divided into two parts. First, this study explored dating violence risk communication and risk perceptions among rural young males (ages 15-24). Second, with the same group, a second aim explored rural young male preferences for interactive and tailored technology-based interventions

responsive to dating violence. This study used a multi-theoretical framework that includes social construction, the relational dialectic theory (RDT), and the unified theory of technology acceptance and use (UTAUT). The study's 27 participants were males aged 15 to 24, who identified as living or attending school in a rural or medically underserved county, had been in serious, casual, or any dating relationships since the age of 13, were comfortable speaking and reading in English, and had access to a secure computer/phone with internet access. Overall, 14 rural young males participated in three online focus groups, and another 13 completed phone interviews. Two qualitative analytical approaches were employed, one for each specific aim. Specifically, this study used an interpretive approach (Aim 1) and a qualitative descriptive approach (Aim 2).

Researcher's Positionality

The PI – is a Black US immigrant male researcher in his thirties – conducted all interviews, established rapport with young rural males based on familiarity with youth-engaged research, previous work with adolescents, young adults, and his weekly involvement with adult partner-abusing men already mandated by the court system to complete a batterer and anger management program. The PI had known several female colleagues, family members, co-workers, and friends who reported experiencing intimate partner violence, often without recourse or reliable sources of support. This study was inspired by the PI's work as a graduate research assistant (GRA) for over three years on a longitudinal randomized trial study with youth ages 15-17 in rural (Missouri) and urban (Baltimore) settings. Led by Dr. Nancy Glass (PD/PI; Johns Hopkins University) and an interdisciplinary team of co-investigators (Drs. Glass, Bloom, Perrin, Alexander, Campbell, Hanson), the specific aims of that longitudinal study were to 1) Inform the adaptation of a dating violence app, the myPlan app¹, using research with adolescents, male and female, ages 15-17). 2) Develop and pilot test the adapted myPlan app (vs. control app) using randomized control trials to examine effects on primary

¹ The myPlan app is a smartphone app (www.myplan.com) also has a conversational agent (or “chatbot”) feature, designed for healthy relationships and safety planning to prevent TDV in serious dating and casual/hook-up relationships among male and female adolescents living in urban (Baltimore) and rural (Missouri) communities.

outcomes (prevention of victimization/perpetration of TDV) and secondary outcomes (e.g., safety behaviors, bystander behavior, self-efficacy for harm reduction and mental health). As a GRA in this study, I was able to identify key issues with recruiting and retaining rural youth to research spaces. Including 1) rural males' low turnout in TDV studies, 2) time constraints on youth time, making them likely to leave focus groups early or reschedule at the last minute, 3) low participation of males in focus group discussions, and 4) logistical constraints in rural areas (e.g., transportation to study venue). In addition, rural youth remain worryingly understudied and undersampled in TDV research, even as they are a vulnerable high-risk cohort.

Definition of Terms

The following terms were used operationally in this study:

- **Adolescence:** Adolescence is a critical developmental time window for adolescents to form lifelong pro-social attitudes (e.g., gender equality, self-confidence, positive conflict resolution strategies, emotional intelligence, as well as an understanding of their place in the world (Santrock, 2016).
- **Adolescence and Young Adult or AYA** - defined in this study as youth ages 15-24 years.
- **Teen dating violence (TDV)** - is defined as a continuum of controlling or violent behaviors by a current or former adolescent romantic partner. Typically, occurring with unmarried, cohabiting, or romantically involved adolescent or young adult partners and between non-intimate acquaintances and strangers.
- **Perpetration:** Refers to the person, usually male, who aggresses an intimate or non-intimate partner, referred to as an abuser, offender, and victimizer.
- **Victimization:** Refers to the person, usually female, who an intimate or non-intimate partner aggresses; also referred to as a survivor or victim.

- **Physical abuse:** Refer to physical violence or aggression to include acts of hitting, punching, slapping, “playfighting,” using hands or objects as weapons with the intent of hurting a partner, and threatening with a knife or gun (Breiding et al., 2014).
- **Psychological (emotional) abuse:** Refers to any verbal and non-verbal actions intended to belittle, harass, manipulate, or mentally and emotionally hurt a dating partner, using threats, harassment, confinement, destroying possessions, threatening to commit suicide/self-harm, as well as psychological coercion and intimidation (Campbell, 1992).
- **Sexual abuse:** Refers to actions or behaviors that force their dating partner to perform sexual acts they dislike and find unpleasant, frightening, or violent (Breiding et al., 2014; Gonzalez-Mendez, & Hernandez-Cabrera, 2009; Nichols, 2006).
- **Digital health** – “The use of digital, mobile, and wireless technologies to support the achievement of health objectives. Digital health describes the general use of information and communications technologies (ICT) for health and is inclusive of both mHealth and eHealth” (WHO, 2016).
- **Risk factors** – “characteristics at the biological, psychological, family, community, or cultural level that precede and are associated with a higher likelihood of negative outcomes” (SAMHSA, 2019)
- **Protective factors** – “characteristics associated with a lower likelihood of negative outcomes or that reduce a risk factor’s impact. Protective factors may be positive countering events” (SAMHSA, 2019).
- **Behavioral Intention** – The degree to which an individual intends to adopt a behavior (Institution of Medicine, 2002).
- **Effort Expectancy** – “The degree of ease associated with using a digital intervention” (Venkatesh, Morris, Davis & Davis, 2003).
- **Facilitating Conditions** – “The degree to which an individual believes that an organizational and technical infrastructure exists” (Venkatesh, Morris, Davis & Davis, 2003).

- **Performance Expectancy** – “The degree to which an individual believes using the system will help them attain gains in job performance” (Venkatesh, Morris, Davis & Davis, 2003).
- **Social Influence** – “The degree to which an individual perceives other relevant people or groups of people who believes they should use the app or technology” (Venkatesh, Morris, Davis & Davis, 2003).
- **Dialectical tension** – “is a system of oppositions that logically or functionally negate one another.” (Baxter & Scharp, 2016, p. 1).
- **Relational dialectics** – “dynamic knot of contradictions in personal relationships; unceasing interplay between contrary or opposing tendencies” (Baxter, 2004; Baxter & Montgomery, 1996).

Significance of the Study

This study bears implications for advocates and practitioners working with rural youth in planning developmentally and culturally appropriate anti-TDV programs. Findings will yield intervention, policy, and research insight by providing a broader framework for developing theory and effective violence prevention practice in low-income, rural contexts. Specifically, findings contribute to a nuanced understanding of how rural young males describe and navigate risk and protective factors of dating violence and their positive and negative assessments of a technology-based intervention to prevent dating violence and promote healthy relationships. To our knowledge, there is no prior investigation of rural male youth risk perceptions and help-seeking needs delivered through technology-based interventions.

Assumptions, Limitations, Delimitations.

The following assumptions were present in this study:

1. It was assumed that rural young men answered the demographic survey accurately and had a clear understanding of each question asked of them.
2. It was assumed that participants were from rural areas, reflected in their zip codes compared to the 2010 Rural-Urban Commuting Area (RUCA) codes. Developed by the US Department of

Agriculture (2014), RUCA codes categorize US regions based on population density, urbanization, and commuting flows, thus were used to establish rurality.

Limitations

The following limitations were present in this study:

1. The study sample was predominantly White (81%) and from the Midwest (65%) and may not reflect rural minority youth experiences, challenges, and complexities with TDV. Furthermore, rural communities are highly heterogeneous, making generalization difficult. Moreover, Black, Asian American, Indigenous, and Hispanic young men draw from different ethno-racial schemas of masculinity, requiring focused attempts to reach these marginalized groups (Dworkin, 2015).
2. Participants in this study were self-selected using a non-random sampling framework, possibly introducing a bias for those willing and able to participate in an online study and be compensated online as was done in this study.
3. Social desirability bias was a limitation. Participants might not have felt comfortable discussing a sensitive topic such as dating abuse or may have answered to garner positive valuation from the researcher (Dalton & Ortegren, 2011).

Delimitations

This study employed two qualitative research aims using semi-structured data analyzed in two ways: qualitative interpretive analysis (Aim 1) and qualitative description (Aim 2). Twenty-seven participants were recruited, who were predominantly White (81%) males between the ages of 15-24 from rural, medically underserved, or health provider shortage areas (HSPA). This sample did not reflect a diverse perspective or the experiences of Black, Asian American, Indigenous, and Hispanic young men. Because of the non-random selection criterion, the results of this research cannot be extended outside the population of this sample.

Summary and Organization of the Remainder of the Study

Chapter Two reviews current dating trends, the prevalence of TDV victimization and perpetration across all youth and rural youth specifically, typologies of TDV, risk and protective

factors of TDV, and current TDV interventions and program models, help-seeking/help-giving intentions and behaviors and concludes with this study's theoretical framework.

Chapter Three describes the study's research methods and procedures. *Chapter Four* - The first sub-study reflecting *Aim 1* explored *how* rural young males dialectically describe their perceptions of TDV risk and protective factors in rural communities as investigated in two research questions (1) How do Rural Young Males perceive risk and protective factors for TDV in their communities? (2) What roles do gender and masculinity play in promoting (or protecting from) TDV among rural males?

Chapter Five - A second sub-study is presented in the form of a manuscript and investigated: (a) what rural male youth consider helpful content, resources, and features in app-based dating violence prevention intervention and (b) unmet needs related to barriers and facilitators for using this type of intervention in rural contexts. *Chapter Six* summarizes the dissertation and its conclusions, as well as an explanation and discussion of the study's findings and how they contribute to current literature. *Chapter Six* outlines the main contribution of this research to the field of dating violence and implications for advocates and practitioners working with rural youth in planning developmentally and culturally appropriate anti-TDV programs and yielded intervention, policy, and for researchers by providing a broader framework for developing theory and effective violence prevention practice in low-income, rural contexts.

CHAPTER II

REVIEW OF LITERATURE AND CONCEPTUAL FRAMEWORKS

This literature review will define adolescence and young adulthood (AYA), summarize dating violence types and prevalence rates, describe TDV risk and protective factors, explain current interventions and their drawbacks, and present a rationale for engaging boys and men in TDV prevention.

Defining Adolescence & Young Adulthood (AYA)

Adolescence is the time course bridging childhood and adulthood and followed closely by young or *emerging* adulthood - defined and coined by G. Stanley Hall (1904) as “the second decade of life” (Arnett, 2000). According to Steinberg’s (2001) triadic classification, there are three phases of adolescence: (A) early adolescence (ages 11 to 14), (B) middle adolescence (14 to 16), and (C) late adolescence (17 to 19). Several scholars count young or emerging adults (age 18 to 25) as a fourth cluster (Arnett, 2006; Steinberg, 2001). This dissertation focused on middle adolescence (15-17) and emerging adulthood (ages 18-24).

Adolescence is characteristically described as a period of “storming and stress” (Harold, Colarossi, & Mercier, 2007), as well as a “time of universal and inevitable upheaval” (Steinberg & Lerner, 2004, p. 46). Hall’s (1904). This “storming and stress” perception of adolescence (with Darwinian origins) informed the 1st wave of studies on adolescent development - starting in the early 20th century and lasting 70 years (Steinberg & Lerner, 2004). Though widely acknowledged by some scholars, this rudimentary viewpoint has faced extensive criticism for its deficit and “broken” outlook of adolescence and an incomplete portrayal overlooking the intrinsic assets, talents, and diversities of today’s adolescents (Lerner, Boyd, & Du, 2010). In the mid-1970s, the second wave of adolescent development research concentrated on adolescent changes, developmental plasticity (individual systemic adjustment during life), and developmental processes between distinct life phases and historical timepoints (Lerner, Boyd, & Du, 2010; Steinberg & Lerner, 2004).

Third-Wave Adolescent Development Studies

This 3rd wave adolescent research, established in the last 15 years, describes today's adolescents as people in constant bidirectional and co-active interaction with their environment and social convoys (e.g., families, communities, and culture) (Lerner, 2002; Lerner, Boyd, & Du, 2010). In their formative years, adolescents proactively balance their biopsychosocial and cognitive development against dynamic relationships with their family, peers, and social environment (Bronfenbrenner, 1979; Bronfenbrenner & Morris, 1998). Governing this process is an inevitable need for autonomy and self-individuation (Erickson, 1986; Lerner, 2002). As a result, adolescence denotes a period in which adolescents strive to meet and exceed familial and societal expectations, assume adult (even parental) responsibilities, engage in normative identity exploration—making adolescence a highly perplexing and challenging period, particularly in the absence of appropriate support from normative or non-normative subsystem(s) and society (Martz, Jameson, & Page, 2016). This third wave approach of conceptualizing adolescence guided this study and focused on the constant bidirectional and co-active interaction between youth and their environment and social convoys. In this way, this study leveraged a strengths-based approach (i.e., Positive Youth Development, PYD) to co-creating meaning with rural youth, as was discussed in this chapter.

Today, American youth are increasingly more socially active/proactive, have higher political cognition regarding global issues concerning them (e.g., climate change), and make informed choices regarding their health and wellbeing (Santrock, 2016). Topics such as sexual and health risk-taking and sensation-seeking (higher in prior generations) have seen marked decreases (Santrock, 2016). In the US, Generation Z or Gen Z (those born between 1996-2009) — report higher contraceptive use, delayed onset/abstinence from sex, and reduced rates of cigarette smoking (not including e-cigs) (Kann et al., 2018). Sexual intercourse among US youth decreased from 54% to 41% between 1991-2015, with those having sex early (before age 13) decreasing from 10.2% to 3.9% in the same period (Kann et al., 2016). From 1999 to 2015, the proportion of US high school students who are sexually

involved and report using alcohol or drugs before their last sexual experience declined by 25% to 21%, with males (5.6%) outnumbering females (2.2%) (Kann et al., 2016).

Young Adulthood & Emerging Adults

According to Arnett (2000), this is “a duration of the life course that is culturally formed, not universal and immutable” (p. 470). Unlike early and middle adolescence, this phase is marked by increased creativity and self-exploration (Santrock, 2002), resulting in greater demographic diversity and unpredictability (11-17 years; Arnett, 2000). Young adulthood is also the period when adult obligations such as early parenthood, seeking and sustaining jobs (i.e., economic independence), residential changes (moving away from home), transfers from school to the workplace, and shifting attitudes toward love, life, and world affairs are embraced (Arnett, 2000; Santrock, 2002). This period is also characterized by increased risk-taking and sensation-seeking (the search for novel and intense experiences) (Arnett, 1994, 2000). Young adulthood is a nebulous term, as many young people feel trapped between puberty and adulthood. As a result, this stage is characterized by exploratory changes in sexual orientation and attitudes, social norms, biopsychosocial traits, physicality, cognitive development, and overall behaviors (Santrock, 2002).

Arnett (2000) refers to this age group as the "forgotten half" (p. 467) since it was more challenging to locate adolescents in late adolescence in school for dating abuse studies. Furthermore, Arnett (2000) indicates that the scarcity of dating abuse studies may be due to a “lack of a consistent developmental definition of this age group” (p. 477; also see [Sianko, Kunkel, Thompson, Small, & McDonell, 2019]), as well as mutable understandings of emerging adulthood across societies. The use of longitudinal study designs to track developmental dynamics with age is one proposed mitigation. (Arnett, 2000). Emerging adult research has been more successful over the last ten years, with novel developmental and theoretical perspectives emerging for this age group. Given these age-related dynamics, the advantages of youth are worryingly understated if we only consider the “storming and stress” archetype. Besides, dated and defective narratives of adolescence counter the person-process and family-systems ecological contributors that enrich the co-active interaction between adolescent

cohorts and adolescents and their diverse environments (Harold, Colarossi, & Mercier, 2007). They may understate what Darling (2007) refers to as the “multiple determinants of development” (p. 203).

Adolescent Dating: Casual & Romantic Relationships

Since TDV exists in dating contexts (whether serious or casual), it is critical to consider current dating trends. According to the CDC, 72% of adolescents aged 13-16 have had or are currently in a dating relationship (Eaton et al., 2010). US youth are choosing to date less and less, with downward trends from 1976-2017 (33% to 14%) – more so with 12th graders (49%) than with 9th graders (15.7%) (Kann et al., 2016). A recent snapshot of dating trends shows dating relationships increasing with age, from 3% in 8th grade to 14% in 12th grade (Child Trends, 2019). Over 20% of US adolescents are early starters (begin dating at ages 10-12) (Connolly et al., 2013). Late bloomers, those who start dating at age 17-19, make up 10% (Santrock, 2016). About 3.4% of US teens had their first sexual intercourse before age 13 (Kann et al., 2018). Improved sexual and reproductive health literacy, anxieties about STIs and early pregnancy, sociocultural attitudes on relationship forms (i.e., polyamory and asexuality), and increased access to contraception contribute to the current decline in dating, which is primarily affected by society, media, and religio-cultural practices (Marsiglio et al., 2006).

Benefits of Dating

Dating is an essential aspect of youth development, future sexual and reproductive experiences (Higgins, Trussed, Moore, and Davidson, 2010). Specifically, dating may serve as:

- (1) A form of identity construction,
- (2) A source of status and accomplishment,
- (3) A type of socialization and rite of passage,
- (4) A platform through which to learn about intimacy and sexual exploration,
- (5) More traditionally, as a mate selection process (Santrock, 2016).

Current Dating Dynamics

The term *dating* is regarded differently across youth groups. Youth labels for dating vary, including hooking up, hanging out, going out with, “situationship,” friends with benefits, with descriptors changing by levels of commitment, duration, and interest (Pittman, Wolfe, & Wekerle, 2000; Vagi et al., 2013). A growing number of adults embrace non-normative relationship styles, including polyamory, mono-normativity, open relationships, and intentional singlehood (Ritchie & Barker, 2006). However, anecdotal evidence indicates this is also occurring with youth. These differing labels and relational styles make it challenging to compare contexts across studies, added to the short duration and transitory nature of youth relationships (Noonan & Charles, 2009; Pittman, Wolfe, & Wekerle, 2000). Thus, defining dating remains a complex undertaking, as the vocabulary remains dynamic. However, as dating relationships become descriptively romantic (Santrock, 2016), it is within this relational context that TDV can occur (Ybarra et al., 2013). This is also when romantic dyads begin to dissociate themselves from sex-segregated peer groups, and dating routines take on greater importance. Talking with people outside the relationship, for example, can lead to a lack of confidence and even envy (Baker & Carreño, 2016).

Typical youth relationships occur in school settings, outside of the home, and can be elusive of parental censure (Noonan & Charles, 2009). When on dates, middle-school teens in a focus group reported engaging in activities such as:

“visiting the mall, talking on the phone, going to the movies, going to Six Flags, eating out, going to school dances or parties, and going to local skating rinks” (p. 1091).

Physically intimate relationships involve kissing, handholding, and hugging, with noted gender-and sexual role expectancies and power imbalances (Noonan & Charles, 2009). With males taking on stereotypical *sex initiator* roles and females expected to take up *sex gatekeeper* roles, levying strict sexual and gender roles that could lead to coercive consent negotiations and sexual aggression (Jozkowski & Peterson, 2013). At this age, other typical relationship behaviors (e.g., jealousy, verbal

confrontation, and peer-endorsed aggressiveness) are predicted. (Giordano et al., 2010). Habitually, these behaviors replicate those learned from adults under social learning conditions (Giordano et al., 2010).

Prevalence of Teen Dating Violence

Adolescents in the United States, aged 10 to 19, account for 13% of the total population (U.S. Census Bureau, 2017). TDV – also known as adolescent dating violence – is characterized as a spectrum of controlling or aggressive behaviors by a current or former adolescent romantic partner. (Breiding et al., 2014; Garcia-Moreno et al., 2013); and encompasses all forms of interpersonal violence from adolescence to emerging adulthood (Mcdermott-Thompson, 2015; Teten et al., 2009).

According to the CDC, TDV encompasses four commonly cited types of dating violence: psychological, physical, sexual, and stalking. Few studies jointly measure all four forms of TDV and their underlying social determinants (Pittman, Wolfe, & Wekerle, 2000; Vagi et al., 2015). However, TDV can escalate into severe forms of harassment/stalking, digital dating abuse, and adolescent intimate partner homicide (Adhia et al., 2019). In most TDV studies, standard TDV metrics capture past-year, past month, and lifetime TDV; they also contextualize TDV with a current or ex-partner, or both, making prevalence statistics highly heterogeneous in the TDV literature. Other forms of TDV include digital abuse (e.g., constant texting, calling, monitoring, password sharing, unsolicited sexting) (Murray & Azzinaro, 2019), interpersonal aggression (controlling behaviors, jealousy, verbal abuse), forced sexual contact, and coercive sex (De La Rue, Polanin, Espelage, & Pigott, 2014).

Both males and females AYA are at-risk for experiencing TDV, with reports of matching risk levels between females and males. AYA reports victimization at 37-41% and perpetration at 29-35% (Tharp et al., 2011; Ybarra et al., 2013). Over 29% of female and male youth (24%) experienced victimization and perpetration (Coker et al., 2014; Johnson, Giordano, Manning, & Longmore, 2015). Sexual violence perpetration occurs at an earlier age for males (27.8% before age 10) than females (42.2% before age 18) (Black et al., 2011). Thus, indicating age-related and gender-based differences in developmental trajectories for TDV perpetration (Ybarra & Mitchell, 2013, p. 1129).

TDV Victimization

According to new figures, 8.2 percent of US middle-to-high school youth in intimate relationships experienced physical dating violence in the previous year, and 8.2 percent were forced to have sexual activity against their will, in addition to online bullying (15.7 percent) and school bullying (19.5 percent) (Basile et al., 2019). In contrast, about 50% reported experiencing psychological abuse (Kann et al., 2018). Physical and psychological abuse experiences are commonly reported TDV typologies, often described in the literature in the context of reciprocal (i.e., mutual violence) between dating partners (49%) (Johnson, Giordano, Manning, & Longmore, 2014; Murray & Azzinaro, 2019; Teten et al., 2009). Female and LGBT+ students are most often victimized (Basile et al., 2019), as TDV is an equity problem with a higher prevalence among society's most oppressed groups. Studies show inconsistent prevalence by grade level (highest in 12th grade) and race/ethnicity (highest with American Indian or Alaska Native youth) (Basile et al., 2019).

Furthermore, the dynamics of TDV perpetration and victimization vary by gender. Girls are more likely than boys to report verbal and physical harassment, while boys are more likely to report sexual and physical violence against partners (Niolon et al., 2015). Prevalence studies suggest boys and girls reporting equal levels of victimization for some forms of violence (Breiding et al., 2014). However, even as male youth are no less likely to be victims (Zweig, Dank, Yahner & Lachman, 2013), victimization similarities between females and males end at the level of TDV frequency of abuse (Molidor & Tolman, 1998). TDV severity, typologies, and patterns vary importantly by gender (Miller, Jones, & McCauley, 2018; Molidor & Tolman, 1998) - with females receiving the worst impact and outcomes (Black et al., 2011; Coker et al., 2014). Young girls are chronically impacted by TDV, with an increased risk of HIV/STI infection, school seclusion, missed school days, debilitating psychological and physical injuries, early sexualization (particularly with minority girls), and unintended pregnancy among female victims (Kato-Wallace, Barker, Sharafi, Mora, & Lauro, 2016). Females and males also differ in their TDV trajectories. According to Sianko and colleagues (2019), victimization among teen boys peaked in 11th grade and then declined; however, victimization stayed

constant for teen girls all through adolescence. Among white youth, victimization peaked at 9th and 10th grades, followed by declines, unlike with African American youth, who experienced unchanging linear increases in victimization (Sianko et al., 2019).

TDV Perpetration

While victimization varies by gender, males (1 in 4) are more likely to perpetrate at least one form of TDV in year-over-year surveys (Garcia-Moreno et al., 2013; Reed et al., 2011; Tharp et al., 2011; Ybarra et al., 2013). Longitudinal studies indicate peaks in perpetration in the early twenties (18-24 years, see Breiding, Chen & Black, 2014), between 16-17 (Foshee et al., 2009), and subsequent drops in perpetration after age 20 (Copp & Johnson 2015) or age 25 (Johnson, Giordano, Manning, & Longmore, 2014; Capaldi & Langhinrichsen-Rohling, 2012). Adjusted for demographics, issues like descriptive norms (“belief about what most people do”), injunctive/prescriptive norms (what teens consider to be acceptable or unacceptable dating violence beliefs or attitudes, see Cialdini, Kallgren, & Reno, 1991), neighborhood violence, and peer acceptance of violence are predictive of urban male TDV perpetration (Marquart et al., 2007; Reed et al., 2011). Despite these results, little is known about how these factors affect rural male TDV perpetration. Female perpetrators report using threatening attitudes, verbal, emotional, and physical harassment, while male perpetrators report using physical and sexual assault as traditional modes of perpetration (Niolon et al., 2015). In a large non-urban sample of 8th, 9th, and 10th-graders ($n = 1666$, 51% male, 25% Black), 13% of Black/African American males, and 31% of Black females reported initiating TDV perpetration (Foshee, McNaughton Reyes, & Ennett, 2010). In the same sample, white non-Hispanic males (25%) and females (30%) reported initiating TDV perpetration - indicating near-identical rates of TDV initiation between Black and white females (Foshee, McNaughton Reyes, & Ennett, 2010). Non-Hispanic white students in a nationwide survey showed the highest perpetration of bullying (Basile et al., 2019).

Predictably, dating violence research tracing perpetration from adolescence into young adulthood point to a strong association between TDV and future violence perpetration (Exner-

Cortens, Eckenrode, & Rothman, 2013; Gorman-Smith et al., 2004; Johnson, Giordano, Manning, & Longmore, 2014; Miller-Perrin et al., 2017; Pensak, 2015) and poly-victimization (or experiencing multiple forms of victimization) (Reed et al., 2011). To illustrate, in a nationally representative sample of youths aged 14 to 21 years ($n = 1058$), 10% of youths reported perpetrating sexual violence in their lifetime; 4% reported attempted or completed rape, with the first sexual perpetration occurring around age 16 (Ybarra et al., 2013). Of note, males were more likely to perpetrate at age 15 or younger (against a younger victim), with perpetration rates becoming equalized between males and females at ages 18 or 19 (Ybarra et al., 2013). However, some forms of TDV are predominantly bidirectional. Females are more likely to perpetrate psychological abuse and minor physical injuries, whereas male-perpetrated involve severe physical injuries and sexual violence (Niolon et al., 2015).

In a study typifying types of teen perpetrators, dating violence researchers identified four motives for female perpetration (i.e., perpetration based on motives, precipitating events, and history of partner abuse) and only one distinct typology for male perpetration (Foshee et al., 2007). Female perpetration took one of four typologies (1) Patriarchal terrorism response (39%), (2) Anger response (25%), (3) Violence used to make a point or enforce an ethic (19%), and (4) First-time aggression response as self-defense (17.3%) – often in the context of self-defense as the primary motive of perpetration (see Foshee et al., 2007). However, in the same study, male perpetration involved highly assorted patterns (too indistinct to typify like with female perpetrators), with common typologies for males being *violence as a form of escalation prevention*, described as “violence to prevent the escalation of female physical fighting (64%)” (p. 511), the subtext being boys were less likely to disclose true motives for violence probably due to concerns for social undesirability. A newer study described this complexity in perpetration patterns among 14- to 18-year-old boys, depicting violence typologies as a continuum of violence (1) nonviolent, (2) perpetrating isolation/control; (3) committing medium-level emotional abuse; and (4) perpetrating all forms of dating abuse (Maria Jose & Rosario, 2014). Reidy et al. (2016) found that just 25% of youth report using only emotional abuse, and 3% agree they perpetrate all forms of TDV as “chronic offenders,” who perpetrate severe violence and

experience bidirectional abuse themselves (also see Rothman, 2018). Consequences for perpetrating TDV include academic underachievement, alienation from friends and family, impaired physical and mental health issues, substance abuse, anti-social behaviors, internalizing/externalizing behaviors, juvenile or criminal record/confinement, social isolation, absenteeism and truancy, poor social participation, and work involvement (Foshee et al., 1996).

Other factors influence TDV perpetration. For example, in a study by Coker et al. (2014), youth who reported both victimization and perpetration were likely to be receiving free or reduced school meals, indicating low socioeconomic status; and be in sexual and gender minority (SGM) groups. In the study by Temple et al. (2016), females who experienced chronic victimization were more likely to report increased hostility leading to TDV perpetration. With males, prior victimization and future perpetration were mediated by internalizing symptoms and emotional distress in the form of anxiety, depression, and hostility (Temple et al., 2016). According to Teten et al. (2009), some TDV outcomes are moderated or mediated by other issues, even as outcomes differ by TDV typologies (p. 924).

Typologies of Teen Dating Violence

Physical Teen Dating Violence

Physical aggression includes acts of hitting, punching, slapping, “play-fighting,” and using hands or objects as weapons (e.g., knife or gun) with the intent of threatening or hurting a partner (Breiding et al., 2014). Approximately 1 in 11 female and 1 in 15 male high school students report experiencing past-year physical violence (Foshee et al., 2012). According to the 2019 Youth Risk Behavior Survey, over 8.2% of US youth reported experiencing physical violence (Basile et al., 2019). Females report moderate physical perpetration but higher rates of male-perpetrated physical victimization leading to chronic damages, injuries, and even fatalities (Graham et al., 2019; Peitzmeier et al., 2016; Ybarra et al., 2013).

Shorey’s (2018) 6-year longitudinal study on AYA dating violence suggests the risk of onset for physical violence perpetration occurred at a younger age for females (on or before ages 15 to 16)

than for males (on or before age 18), making a case for early prevention before TDV onset. There are conflicting and controversial reports on gender-specific perpetration rates of physical violence (Teten et al., 2009). Some studies report higher physical perpetration among females, touting higher female-perpetrated physical abuse (Barter et al., 2009; Watson, Cascardi, Avery-Leaf, & O'Leary, 2001). Other studies suggest females report twice the physical victimization rates compared to males (Wolitzky-Taylor et al., 2008; Vagi et al., 2015), or equally matched rates of aggression (i.e., the gender parity narrative) (O'Leary, Slep, Avery-Leaf, & O'Leary & Slep, 2003; Wekerle et al., 2001). Some studies report equal rates of victimization among adult female survivors, but with more detrimental effects among rural women deprived of adequate support (Edwards, 2014). While females report retaliation and self-defense as the primary motive for their aggression, males are likely to use aggression as a control device, giving credence to the link between expected gender roles, observed learning of gender roles, and TDV (Mulford & Giordano, 2008). Ten-year trends (2003-2010) show physical victimization rates decreased among AYA in Canada (5.9%-5.0%), mainly for boys (8.0% to 5.8%) than for girls (5.3% to 4.2%) (Shaffer, Adjei, Viljoen, Douglas, & Saewyc, 2018); suggesting higher physical victimization among boys compared with girls (Shaffer et al., 2018). However, studies report contrasting physical violence perpetration by gender.

Sexual Teen Dating Violence

Sexual teen dating violence involves the use of force to coerce another person to perform involuntary sexual acts under coercion or the threat of harm (Breiding et al., 2014; Gonzalez-Mendez, & Hernandez-Cabrera, 2009; Nichols, 2006). Over 1 in 9 females and 1 in 36 male high school students report past-year *sexual violence* in dating relationships (Niolon et al., 2017). In a recent national survey by the CDC, the prevalence of sexual dating violence was higher among female (12.6%) than male (3.8%) students (Basile et al., 2019). Among all students, those experiencing at least one sexual abuse victimization as follows for white students was 42.2%, but highest in Hispanic (45.0%), followed by Black students (29.0%) (Basile et al., 2019). Over 3.8% of females experience both sexual and physical abuse, compared to 2.1% of all males (Basile et al., 2019). However, this

survey typically represents student samples from large urban school districts only, potentially excluding rural adolescents (Exner-Cortens et al., 2016).

Overall, these rates were significantly higher for 12th graders (between 11.7%-13.9%) than 9th graders (8.1%-8.8%) (Kann et al., 2018; Niolon et al., 2017), implying age-related challenges with negotiating gender roles as relationships become more serious or last longer (Johnson, Giordano, Manning, & Longmore, 2014). Studies using convenience samples suggest rates of adolescent sexual teen dating violence vary between 8%-25% for females and 5%-11% for males, with variations linked to the type of outcomes measures used to measure SV and the populations sampled (Vagi et al., 2015). When compared to girls who were not sexually active, girls who had a history of active sexual activity were also more likely to experience sexual assault (Decker, Raj, & Silverman, 2007). Of note, AYA males are more likely than females to perpetrate sexual teen dating violence (Niolon et al., 2015). Male sexual violence perpetration is linked to the joint perpetration of other forms of TDV (Niolon et al., 2015). It is worth noting some studies report equal rates of sexual violence victimization and perpetration irrespective of gender; however, female collegiate samples consistently report higher rates of rape (Teten et al., 2009). Most men who perpetrate sexual violence in adulthood will first do so as adolescents (Peacock & Barker, 2014).

According to DeGue et al. (2014), sexual violence prevention services often employ momentary psycho-educational techniques to alter behaviors supportive of dating violence, adjust real behavior, and raise consciousness about the effects of sexual harassment. Pre-post designs are often used to assess program efficacy (DeGue et al., 2014). Still, evidence of SV program effectiveness (i.e., in the long term) remains sparse even after rigorous evaluation (DeGue et al., 2014). Just a few primary programs in their review of sexual violence programs showed signs of modifying SV behavior. Among these are:

- (1) *Safe Dates* – this popular program was conducted with high schoolers in rural counties across North Carolina (see Foshee et al., 1998, 2004, 2008, 2014 for program evaluation).

- (2) *Shifting Boundaries* – This student-based and building-level TDV prevention program was designed for middle school students using a six-session curriculum (Taylor et al., 2011, 2013); and
- (3) A cluster of programs sponsored by the Office of Violence against Women (OVW) under the 1994 Violence Against Women Act (VAWA; Boba & Lilley, 2009) also demonstrated positive outcomes.

In the same review by DeGue et al. (2014), five interventions did not change SV outcomes (i.e., had null effects) in at least one round of evaluation (DeGue et al., 2014). Three studies also reported probable adverse results from these interventions. DeGue et al. (2014) posit a significant limitation of most of these programs was their considerable low dosage in their use of one-off brief psychoeducational program formats, even as interventions contend for time with pre-planned school activities. This limitation is a common failing of school-based interventions constrained by pre-defined school schedules and increased demands on time during intervention implementation.

Psychological Teen Dating Violence

Psychological dating violence (typically construed as emotional abuse) constitutes verbal and non-verbal actions intended to embarrass, manipulate, or mentally and emotionally hurt a dating partner – and the most reported form of TDV (Campbell, 1992; Temple et al., 2016; Teten et al., 2009). Psychological dating violence occurs via the use of threats, psychological coercion, intimidation, harassment, destroying possessions, social isolation, coercive threats to commit suicide/self-harm, and social isolation from family and friends (Campbell, 1992; Teten et al., 2009). Rates of adolescent psychological dating violence are reported to match those in adult relationships in frequency (Pittman, Wolfe, & Wekerle, 2000). In the study by Coker et al. (2014), at least one in three students experienced either combined physical and psychological dating violence, with higher rates among females (37.2%) than that among males (28.7%). Only 20.1% of victims experienced psychological dating violence without physical dating abuse, confirming the high association between physical and psychological violence reported in the TDV literature (Coker et al., .2014). Youth

samples seem to be more likely to report psychological dating violence than physical dating violence (Coker et al., 2014; Foshee et al., 2009).

Break-Up Violence

Break-up violence is an emerging typology of TDV (Ferreira & Matos, 2013; Davis & Frieze, 2002), describing violence at or after the cusp of a relationship's ends. In youth, break-up violence may become public peer-centered abuse, beginning with intimidation, teasing, bullying, post-breakup stalking, social slander, verbal insults, and strategic social isolation from a shared circle of friends (Baker & Carreño, 2016; Ferreira & Matos, 2013; Davis & Frieze, 2002; Murray & Azzinaro, 2019).

Adolescent Intimate Partner Homicide

In severe cases, adolescent intimate partner homicide (5,319 US youth in 2016) has been reported (see Adhia, Kernic, Hemenway, Vavilala, & Rivara, 2019). According to Adhia and colleagues (2019), 5,319 adolescent intimate partner homicides occurred among US youth in 2016. From this number, 2188 adolescent intimate partner homicides (age 11-18) occurred between 2003-2004; 90% of the victims were female, mostly age 16, perpetrated by a male partner.

Cyber Dating Abuse

Baker and Carreño (2016) report cyber dating abuse to include digitally assisted forms of monitoring, online stalking, cyberbullying, online harassment, sexual solicitations, sextortion, doxing (disclosing personal information online in retaliation), or swatting (calling to elicit police response on someone to report a fake crime), non-consensual pornography (or revenge porn), sexualized threats, and digital coercive behaviors with several adverse implications. Cyber dating abuse is an emergent form of dating abuse (Murray & Azzinaro, 2019). According to the National Institute of Justice,

“Technology-facilitated abuse is the use of technologies such as texting, mobile applications, telecommunications networks, and social networks to bully, harass, stalk, or intimidate another person — including adolescents. In most cases, the perpetrator is someone the victim knows, and often in the context of intimate partner violence” (Rosenstein, 2018; NIJ, 2020).

According to the evidence, girls are more likely than boys to report being cyberbullied (22% vs. 10.8%) (Messias, Kindrick, & Castro, 2014; Zweig, Dank, Lachman, & Yahner, 2013).

Approximately half of female high school students and a quarter of male high school students who experience sexual or physical harassment by a dating partner also report being cyberbullied (Vagi, Olsen, Basile, & Vivolo-Kantor, 2015).

Among US high school students, cyberbullying is commonly reported as the use of digital media for bullying and has been associated with suicidal ideation and attempts (Messias, Kindrick, & Castro, 2014). Unlike school bullying, which decreases with age, the prevalence of cyberbullying increases from early adolescence at 14-year-olds (6.2%) to late adolescence among 18-year-olds (7.4%) (Messias, Kindrick, & Castro, 2014). According to the 2017 YBRS, the prevalence of cyberbullying is higher among LGBTQ+ than non-queer youth (37%, see Zweig, Dank, Lachman, & Yahner, 2013), females (19.7%) than male students (9.9%) (Kann et al., 2018). According to various reports, cyber dating abuse and psychological dating abuse overlap significantly (Zweig et al., 2013).

When it comes to race/ethnicity and gender, white female students (23.0%) recorded more cyber dating violence than Black (13.3%) and Hispanic female students (17.2 percent). Although white male students (11.2%) recorded higher rates than Black (8.4%) and Hispanic male students (7.6%), these rates were highest among 9th-grade females (10.9%) and 9th-grade males (10.9%) (Kann et al., 2018). (Kann et al., 2018, p. 17). White students (17.3%) had a higher prevalence than Black (10.9%) and Hispanic (12.3%) students, and non-heterosexual youth (27.1%) had a higher prevalence (Kann et al., 2018). Unsurprisingly, victims and perpetrators of cyber dating violence often overlapped with victims and perpetrators of psychological dating abuse (Zweig, Dank, Lachman, & Yahner, 2013). Studies also show a significant overlap between cyberbullying and future cyber dating violence (Oudekerk et al., 2014).

The way technology is used for forming and sustaining romantic relationships is construed differently by males than females (Baker & Carreño, 2016). Young males describe initial online strategies leaned towards “hooking up,” while girls considered this a period of getting to know their

would-be partners (Baker & Carreño, 2016). At this age, password sharing is a sign of high trust but can also be a precursor of monitoring and controlling behaviors (Baker & Carreño, 2016). Boys “checked on” their partners, preventing contact with members of the opposite sex, while girls reported *monitoring* in the context of watching out for their partner’s safety and wellbeing (Baker & Carreño, 2016). Technology also facilitated a lesser discussed practice of partner-imposed isolation. When this became a problem, adolescents endorsed breaking off contact by using maladaptive behaviors such as self-isolating behaviors (intentionally switching off their phone) - predictive of an ending relationship (Baker & Carreño, 2016). Factors predictive of experiencing cyber abuse include being female, a high degree of exposure to digital technologies, frequent drug and alcohol use, participation in delinquent behaviors, being sexually active (i.e., sex in the last three months), mental health issues (e.g., depression), psychosocial issues (e.g., anger/hostility, anti-social tendencies) (Zweig, Dank, Lachman, & Yahner, 2013).

TDV Differs from Violence in Adulthood

Differences Between Teen and Adult Dating Violence

Adolescents and young adults are more vulnerable to dating violence, given they are still in developmental phases and experiencing physiological, hormonal, cognitive, neurodevelopmental, and emotional changes (Murray & Azzinaro, 2019). TDV in adolescence may be complicated by the teen’s need for autonomy, individuality, reliance on immediately accessible social convoys (e.g., peers, siblings, and online sources), lack of prior referent experiences with relationships, and are in a distinctive period of brain development (i.e., hypoactive pre-frontal cortex) (Murray & Azzinaro, 2019). In addition, youth are inherently in the phase of their lives where they are prone to sensation-seeking, experimentation, and risk-taking (Santrock, 2016), with potential inhibitions to their risk perception, risk tolerance, and risk communication. Thus, this developmental phase is a critical time during which they form prosocial skills (e.g., empathy, gender parity, and cognitive perception of self and others in the world). At the interpersonal level, this is the time youth develop conflict-resolution

skills and review cultural scripts tolerant of gender norms and beliefs (Bivens & Hasinoff, 2017; DeGue et al., 2014).

Several typologies explain adult intimate partner violence (IPV) (Rothman, 2018). For instance, Michael Johnson's three IPV typologies have been used to describe adult partner violence as (1) intimate terrorism/coercive controlling violence (most common form and chronic), (2) situational couple violence (least common, and can be "non-severe, non-injurious, and mutual" [see Rothman, 2018]), and (3) violent resistance (Johnson 1995, 2010; Stith & McCollum, 2011). With married partners, Holtzworth-Munroe and Stuart (1994) propose their popular marital violence subtypes: (1) family-only (FO), (2) borderline-dysphoric (BD), and (3) generally violent-antisocial (GVA). Hamberger et al. (1996) also describe their own typologies of perpetrators non-psychopathological, negativistic/dependent, and antisocial/narcissistic (Hamberger et al., 1996). However, the literature on adolescent dating violence typologies has not developed as evidently as the distinct typologies of violence in adult intimate partnerships.

Unlike adults, adolescents in dating relationships are unlikely to be married, cohabiting with their partners, and may not be shouldering parenting responsibilities. These peculiarities make adolescent dating violence trajectories and dynamics highly diverse. As a result, it is not uncommon for parents, school officials, care providers, and first responders to misrecognize TDV and adolescent partner abuse as "kids being kids" (Pensak, 2015) or characterize physical violence in schools as "boys being boys," or characterize physical violence in schools as "play fights." (Pensak, 2015). To a close observer, play-fighting (so-called "horseplay") are characteristically overt adolescent behaviors that may constitute aggressive behaviors precipitating abuse (Gonzalez-Mendez, & Hernandez-Cabrera, 2009; Pittman, Wolfe, & Wekerle, 2000; Vagi et al., 2015). Verbal insults in schools are considered in AYA contexts as ploys to seek attention, acts of flirting, or immature ways of demonstrating group belonging, and so should be interpreted differently across contexts (Pittman, Wolfe, & Wekerle, 2000). However, dating violence research shows that about 43% of dating abuse happens on school grounds (Zweig et al., 2013).

Furthermore, AYA and adults differ in terms of help-seeking and help-giving behaviors. Adolescents are more likely than adults to offer emotional support to a peer who is a victim (Fry et al., 2013). Help-seeking among adolescents may involve acts and behaviors to solicit emotional and material support for a distressing event or condition (Hedge, Sianko, & McDonell, 2016). This may be obtained from friends and family (i.e., informal help-seeking) or trained counselors, advocates, school staff, legal actors (i.e., professional help-seeking) (Hedge, Sianko, & McDonell, 2016). In most cases, youth new to casual or romantic relationships avoid parental involvement for fear of blame and chastisement (Hedge, Sianko, & McDonell, 2016). Instead, they elicit support from trusted peers-as-bystanders and other informal sources (e.g., online support, Fallon & Bowles, 1999) or co-ruminate with members of their social convoy (Banyard, Moynihan, Walsh, Cohn, & Ward, 2010; Ehrenreich & Underwood, 2016; Fry et al., 2014; Waller & Rose, 2013).

Co-rumination, or “negative dwelling,” is a peculiar coping and help-seeking strategy among youth. Co-rumination (or simply, rumination) is described as “extensively discussing, rehashing, and speculating about problems, and focusing on negative feelings” (Rose, 2002; Waller & Rose, 2013). While co-rumination can occur as a proximal coping strategy online (social media) or offline (between social convoys), youth victims of TDV have been known to employ harmful distal coping strategies different from adult coping tactics. As youth are prone to using:

- A. “*Traumatic bonding*” or the ostensible psychosocial belief that cyclic abuse fortifies emotional attachment (Dutton & Painter, 1993)
- B. Mistaking attachment issues (e.g., extreme jealousy, anxiety, avoidance, fear of abandonment, excessive texting, and social media messaging) for partner affection and the absence of these qualities as lack of interest in the relationship (Glass et al., 2003; Wekerle & Wolfe, 1999),
- C. A menu of internalizing and externalizing behaviors commonly noted among adolescents experiencing TDV (Foshee et al., 2014; Pensak, 2015).
- D. Coping through risky health behaviors (Sianko et al., 2019).

There are other well-known differences between youth and adult dating violence. Outcome measures used to diagnose TDV may not fully capture types, patterns, and subtleties in youth relationships, even as youth relationships can be highly dynamic and short-lived, lasting a few days to some weeks (Noonan & Charles, 2009; Pittman, Wolfe, & Wekerle, 2000). Young people may also exhibit cognitive dissonance and may disagree with being branded as *victims* or *abusers* (Weisz & Black, 2009). Further, youth victims may not know how to define their abuse or may misrecognize the red flags of their own victimization (Weisz & Black, 2009). Since teen reputation, popularity, sense of belonging, and social desirability matter even more at this stage of life (see Luthar & McMahon, 1996), current narratives of *victims* and *abusers* may connote helplessness and defectiveness, respectively; and can be alienating and stigmatizing as these narratives conflict with dominant stories of hegemonic masculinity (Pittman, Wolfe, & Wekerle, 2000; McCarty, 2009).

In addition, teenagers experience short-lived relationships using different descriptions. Common examples include “hooking up,” “situationship,” “seeing,” “friends with benefits,” and describe their partners as “sidepiece,” “baby mama/baby daddy,” making it challenging to fully understand TDV dynamics and to contextualize abusive behaviors (Eaton & Stephens, 2018). It is also likely that youth from underrepresented groups may define relationship violence using terminologies different from majority culture (Eaton & Stephens, 2018; Stephens & Eaton, 2016). Teenagers may attend the same school or share the same social cycles as their abuser, making isolation, non-disclosure, stalking, and lack of trust more likely, not to mention threats to safety. The Teen Power and Control Wheel was created as a conceptual model to explore these differences in teenage and adult dating abuse. The Teen Power and Control Wheel is an adaptation of the adult-facing Power and Control Wheel developed by the Domestic Abuse Intervention Project (DAIP; Pence & Paymar, 1993). This Teen Power and Control Wheel helps explain unique patterns of abuse specific to teens, uses gender-neutral language to describe instances of victimization and perpetration, and catalogs patterns of TDV peculiar to teenage relations (Mcdermott-Thompson, 2015).

Similarities Between Teen and Adult Dating Violence

Youth relationships share fundamental similarities with adult relationships. Pittman et al. (2000) suggest similar patterns of psychological and emotional abuse, as well as similar cyclic nature of violence as seen in adult relationships (i.e., “building of tension, an explosion of anger, and a honeymoon period of “making up; see p. 218). Different from adult relationships where men are likely abusers, youth relationships reliably indicate episodes of mutual and reciprocal violence – “where the individual both sustains violence and initiates violence within the dating relationship” (Pittman, Wolfe, & Wekerle, 2000, p. 221; Teten et al., 2009). Youth and adult dating violence also share similarities in terms of violence directionality. Some dating violence researchers emphasize bidirectionality in abusive adult and youth relationships (the equal likelihood that males and females perpetrate at equivalent rates) (Rothman, 2018). However, the idea of mutual and reciprocal violence remains a contentious topic in the literature, with researchers describing various partner abuse dynamics that vary widely per context (Rothman, 2018).

In addition, female youth perpetrating physical and verbal abuse also report suffering injurious physical and severe sexual violence from male partners, making it imperative to contemplate the bidirectionality of TDV by gender and age (Flood, 2018; Pittman, Wolfe, & Wekerle, 2000). There are also differences along regional and socioeconomic lines. According to a multi-wave survey of 5,118 adolescents, girls from impoverished rural communities exhibited more violent activities earlier and more frequently than peers from more affluent neighborhoods (Karraker-Jaffe et al., 2009). However, this association did not exist for boys in this study, conceivably suggesting other influences beyond socioeconomics on male TDV experiences.

Risk & Protective Factors of TDV Across the Social Ecology

Understanding risk and protective factors mitigating TDV exposure is critical knowledge for identifying what works best for whom and under what circumstances. A 2018 review by the Community Preventive Services Task Force (CPSTF) - as well as the latest CDC Injury Center Report (2008-2018) - uncovered gaps in our understanding of causal and modifiable risk and protective factors of TDV among youth (Niolon et al., 2015). Specifically, a lack of evidence on age-

appropriate, evidence-based TDV interventions with low-income rural youth. Moreover, there is a scarcity of studies on the etiologic risk and protective factors of TDV (Shorey et al., 2015). Given the importance of understanding risk and protective factors as a starting point for contextualizing TDV victimization and perpetration and improving on current responses to TDV, explicit dating violence research on sample-specific risk and protective factors of TDV among rural youth remains worryingly sparse (Vagi et al., 2013; Vagi, O'Malley Olsen, Basile, & Vivolo-Kantor, 2015).

Theoretical Frameworks Explaining Risk and Protective Factors.

Scholars commonly use theoretical frameworks to explain TDV and delinquent behaviors that may be based on historical, intergenerational, life course, proximal-distal, biological, socio-cultural, and criminological origins. Popular theories used in this domain include:

1. Bronfenbrenner's (1979) ecological systems model,
2. Riggs and O'Leary's (1989) Background-Situational model of dating violence, including Frustration-aggression-displacement theory (Dollard et al., 1939), Bell & Naugle's (2008) Integrated Contextual framework. These theories focus on antecedent factors (i.e., past predictors of future violence), as well as situational contexts currently sustaining TDV (see Foran & O'Leary, 2008; McNaughton Reyes et al., 2016).
3. Sociocultural and sociological theories: such as the Social learning theory (Bandura, 1978) and Symbolic-interactionist theory, depict the influence of social ecologies on TDV.
4. Feminist theories, including Structural inequality theory, Resource/exchange theory,
5. Criminology theories, including the Routine activity theory and Target congruence theory (Sween & Reynolds, 2016)
6. Genetic and epigenetic theories,
7. Personality trait theories, such as Bowlby's Attachment Theory (Ainsworth & Bowlby, 1991).

Velotti et al. (2018) found 47 studies investigating attachment types among IPV victims in a recent study. Most of these studies have shown an increase in interest in the impact of attachment

types on TDV risk over the last decade. Bandura's (1977) Social Learning Theory has been used to describe the trajectories and etiologies of TDV risk at the interpersonal level (Vagi et al., 2013).

Undoubtedly, there is no scarcity of theories explaining partner violence, as theories legitimize interventions, provide a blueprint for program development and validation, and improve their chances of intervention success (Nation et al., 2003; Rothman, 2018). However, risk factors are now more commonly described per Bronfenbrenner's (1979) ecological model to include four main categories: individual factors, interpersonal (family, peers, partner), environmental factors (school and community), and socio-contextual factors.

Using Bronfenbrenner's (1979) ecological systems model, dating violence researchers situate risk in multiple ecological levels of origin. Those who use the Background-Situational Model of dating violence (Riggs and O'Leary, 1989) focus on antecedent factors (i.e., past predictors of future violence), as well as situational contexts sustaining TDV (see Foran & O'Leary, 2008; McNaughton Reyes et al. 2016). Those who use Bandura's (1977) Social Learning Theory explain partner violence perpetration as a behavior learned "either deliberately or inadvertently, through the influence of an [influential] example" (Bandura, 1977, p. 5; Tussey, 2018). Of all these theoretical foundations, Vagi et al. (2013) suggest the Background-Situational Model presents a more robust causal framework since it considers proximal and distal risk factors for TDV across the lifespan (p. 6).

Scholars commonly agree adolescents who experience violence in the home are prone to using violence as adults (Vagi et al., 2013). A violent dating history, family violence, and acceptance of TDV are perhaps the most influential longitudinal predictors of future perpetration (Cohen et al., 2018; Kato-Wallace, Barker, Sharafi, Mora, & Lauro, 2016; Vagi et al., 2013). However, the acceptability of TDV is weakly associated with actual TDV perpetration, indicating the influence of other more reliable predictors (e.g., family violence and TDV history) (Hébert et al., 2017; Shorey, 2018). TDV victims (and perpetrators) also share risk factors such as prior community violence exposure, maltreatment history, and passive tolerance of violence (O'Keefe, 1998; Pittman, Wolfe, & Wekerle, 2000). Niolon, Reidy, and Hall (2016) showed passive tolerance of violence moderates the

association of traditional gender role expectations and TDV perpetration. A review of 20 articles by Vagi et al. (2013) on risk and protective factors for TDV perpetration among American and Canadian youth samples identified 53 risk factors with established temporal order for TDV perpetration. These fifty-three risk factors are classified into eight categories:

1. Mental health problems (e.g., anxiety, depression, antisocial behavior),
2. Aggressive thoughts and cognitions (e.g., anger, hostility, internalizing/externalizing behaviors, passive acceptance of TDV),
3. Youth and gang violence,
4. Substance use (alcohol and marijuana),
5. Pro-social peer relationships and friendship quality,
6. Family relationships and quality (e.g., parental marital conflict),
7. Exposure and use of aggressive media, and
8. Demographic factors (e.g., child's race, gender).

Individual-level Risk Factors

Individual risk factors may include violence acceptance in relationships, antisocial behavior, age (older than age 18), aggression-tolerant attitudes, alcohol use, anxiety, child's sex, race/ethnicity, chronic offenders of violence throughout adolescence, depression (common in most studies), drinking – frequency by volume, drug, and alcohol use, 8th-grade sexual initiation, emotional distress, suicide attempt, fighting, peer violence, general aggression, antisocial behavior (Foshee, McNaughton Reyes, & Ennett, 2010; Vagi et al., 2013, p. 4). Across race/ethnicity, risk factors identified for African American youth included high consumption of violence tolerant and gender-stereotypical media compared to other groups, exposure to community violence linked to historically low socioeconomic statuses, and alternative/informal forms of help-seeking (Eaton & Stephens, 2018). The adoption of colonial gender roles, physical and psychological segregation, and prejudice due to historical trauma have all been established as potential risk factors for TDV among Native Americans (Eaton & Stephens, 2018).

Relationship-level Risk Factors

Relationship-level risk factors were family-based or centered around interpersonal relationships (low-income family communication, marital conflict (parents), family violence, childhood physical abuse, and harsh/poor parenting practices). Peer-based risk factors include early involvement with antisocial peers, peer violence/fighting, known perpetrator/abuse of TDV, poor social support, and friendship quality (Vagi et al., 2013). A higher number of sex partners, a history of prior abuse, and trauma are all interpersonal risk factors. Usage of marijuana, alcohol, and other drugs are all risk factors in relational contexts. Sex desirability and the use of violent, sexualized media were identified as risk factors for health behaviors. (Vagi et al., 2013, p. 4). Of the 20 articles, only two focused on both risk and protective factors (Vagi et al., 2013). Longitudinal predictors of TDV perpetration included the “use of aggressive media, aggressive behavior towards peers or others, substance use, risky sexual behavior, and having antisocial peers” (p. 4). Another analysis of three independent meta-analyses found peer-level risk factors such as peer perceptions of dating violence, peer violence, and antisocial behavior, the number of friends victimized, the number of friends who are perpetrators, and being victimized by peers to be substantially linked to both TDV perpetration and victimization. (Foshee, McNaughton Reyes, & Ennett, 2010; Garthe, Sullivan, & McDaniel, 2017).

Protective Factors for TDV: Individual- and Community Level

Unlike risk factors, protective factors have received less attention in the literature (Eaton & Stephens, 2018; Vagi et al., 2015). High cognitive dissonance or positive attribution to TDV, high empathy, academic success, high verbal IQ, a good mother-child relationship, and a clear link to one's school have all been identified as protective factors, and higher GPA (Cleveland, Herrera, & Stuewig, 2003; Vagi et al., 2013). Just three studies (out of twenty) focused on protective factors in a study of risk and protective factors. Advanced social skills and emotional intelligence have been described as protective factors against TDV in females (Murray & Azzinaro, 2019; Sianko et al.,

2019). For boys, higher emotional regulation mitigates the likelihood of perpetrating dating violence (Sianko et al., 2019).

Arguably, the literature on family stress theories shows rural adolescents remain chronically exposed to a matrix of adverse childhood experiences (or ACEs) or traumatic events that transpire in the first 18 years of life. ACEs exacerbate TDV risks (Foshee et al., 2015). ACEs include exposure to child abuse and neglect, adult dating violence, community violence, and parental divorce or suicide, linked to risky health/sexual behaviors (e.g., substance use before/during intercourse, multiple sexual partners, unplanned teen pregnancies, unprotected sex, see Shorey et al., 2015), chronic diseases (e.g., cancers, diabetes, obesity), low social participation, and even early death (St. Mars & Valdez, 2007; Vezina & Hebert, 2007). While there are conflicting prevalence reports on TDV between urban, rural, and suburban adolescent (Martz, Jameson, & Page, 2016; Marquart et al., 2007; Sianko et al., 2019; Spencer & Bryant, 2000), few would argue rurality is compounded by factors such as family violence with a known male perpetrator, substance use, juvenile justice involvement, and violence accepting attitudes (Marquart et al., 2007; McCauley, Breslau, Saito, & Miller, 2015; McDonnell et al., 2010).

However, only a few studies have established protective factors for TDV (Vagi et al., 2015). Just one study focusing on protective factors was found in a recent 2013 review of 20 studies (McCauley et al., 2015). This information is vital for understanding the applicability of technology-based interventions to meeting multiple health behavior change objectives for youth risk behaviors (substance use, gang involvement) privately and confidentially. In short, this information is vital to developing best practices useful in predicting the utilization of technology-based interventions in the future (Kim, 2015).

While rural partner violence occurs in chronic and severe forms compared to urban/suburban populations (Edwards, 2014; Marquart et al., 2007), a recent review of the literature showed active family involvement (especially maternal influence, positive father involvement), religious engagement, teen socialization around positive gender norms (e.g., gender equity), high

academic performance, prosocial skills (e.g., empathy), negative TDV expectations (e.g., remorse, guilt), self-mastery of dating skills (e.g., consent before sex and use of contraceptives) could offer protective effects against TDV risk factors deeply rooted across sociocultural landscapes (Howard, Qiu, & Boekeloo, 2003; Salazar et al., 2018; Tharp et al., 2013; Vagi et al., 2013) (Marsiglio, Amato, Day, & Lamb, 2000; Barker & Verani, 2008; Foubmi & Lovich, 1997; Horn, 1999; Shapiro, Krysik & Pennar, 2011). Other protective factors include parental bonding (Murray & Azzinaro, 2019; Morris et al., 2008), parental warmth, teen self-respect, and teen self-esteem (Akers, Yonas, Burke, & Chang, 2010), and emotional regulation, particularly among older boys (≥ 18 -year-olds) (Fernández-González et al., 2018; Sianko, Kunkel, Thompson, Small, & McDonell, 2019). Modeling of pro-social behavior by peers and responsible adults, pro-social controls, as well as the availability of opportunities for positive youth engagement are known protective factors (Morris et al., 2008). Emotional intelligence was also a common factor in trajectories to dating violence perpetration, particularly among adolescent girls (Fernández-González et al., 2018).

Implementation scientists show current studies “inadvertently exploit or ignore, rather than transform thinking about sex and gender-related factors” (Tannenbaum, Greaves, & Graham, 2016). Finding ways to incorporate protective factors as a strength-based approach into digital behavioral change interventions is critical. Even more significant is finding ways to include covariates such as age, socioeconomic status, gender identities, peer influence, and social norms into digital health interventions. For example, various reports on mixed-gender interventions show male-specific programs are more useful when they incorporate sociocultural situations around masculinity and gender normative thinking (De Koker et al., 2014). Therefore, interventions targeting causal and modifiable psychosocial, structural, and cultural risk factors may have the most significant impact in preventing future victimization, empowering bystanders, and perpetration, as have been consistently cited over time (De Koker et al., 2014; Guilamo-Ramos, Bowman, Santa Maria, Kabemba, & Geronimo, 2018).

Moreover, harmful cultural scripts on definitions of manhood, masculinity, homophobia prevent abuse disclosures and promotes the normalization of physical violence (between 28%-33%) described as “play fighting” (Foshee et al., 2007, Hickman et al., 2004), with social class and other minority statuses being consistent risk factors (Haynie et al., 2013; Miller-Perrin et al., 2017; Miller et al., 2018), as well as the sex of sexual contact partners (Eaton et al., 2017; Kann et al., 2018). Identifying emerging individual- and community-level risk and protective factors is critical for informing program implementation with violence researchers and policymakers working with at-risk rural youth to improve individualizable support for health and behavioral issues.

Eaton and Stephens (2018) identified protective factors among Black, Native American, and Latinx youth. Among African Americans, positive parental communications, and parental expectation, mainly of women and girls (acts as a buffer for risk-taking and sensation-seeking) as protective factors (Eaton & Stephens, 2018). Strong family relations and the maintenance of cultural traditions have also been identified as protective factors, according to studies involving diverse groups of indigenous people (Eaton & Stephens, 2018). Other factors, such as ethnic pride and fealty to traditional cultural values and norms, are protective among Hispanic youth (Eaton & Stephens, 2018).

Current TDV Intervention and Program Models

Exploratory analysis of the literature revealed a range of violence prevention interventions that advertise behavior change techniques (BCTs) with some notable success, even as most programs are not evaluated for empirical evidence (Weisz & Black, 2009). These interventions are replete, and a series of systematic reviews have been conducted on dating violence intervention programs (Graham et al., 2019). However, wide variations in their program evaluation, effectiveness reports, and issues with potential bias (selection biases and “file drawer” phenomenon or reporting only positive results) call into questions the real efficacy of some of these programs (De Grace & Clarke, 2012; Weisz & Black, 2009).

School-Based Programs

Collective evidence suggests universal school-based TDV prevention programs are predominant in the literature. School-based interventions are conducted in college-based, after-school, and sport-focused settings. Outside of schools, TDV programs occur in community-based, hospital-based settings or are facilitated by third-sector organizations such as non-governmental organizations (NGOs), anti-violence program implementers, dating violence researchers, and domestic violence agencies. These interventions are delivered using youth-friendly strategies beyond didactic and pedagogic teaching, to include art projects (spoken, visual, and performing arts), interactive poster and photography contests (e.g., *Safe Dates*), and youth-led leadership programs (De grace & Clarke, 2012, p. 852). However, few studies still uphold their scientific soundness following appraisal for evidence (Watts, 2016; Weisz & Black, 2009). Moreover, only a handful of programs adopt the prescribed nine principles of effective prevention programming, as identified in a review of reviews of existing child and adolescent prevention programs (see; Nation et al., 2003). Nation et al. (2003) propose that successful prevention programs must incorporate these nine standards, which have been adopted by the Substance Abuse and Mental Health Services Administration (SAMHSA):

- (1) Comprehensiveness,
- (2) a variety of teaching approaches,
- (3) an adequate intervention dosage,
- (4) a theoretical foundation
- (5) Possibilities for positive interactions
- (6) Appropriate pacing,
- (7) Sociocultural significance
- (8) Assessment of outcomes,
- (9) well-trained personnel (see Nation et al., 2003, p. 449).

So far, studies show only the *Safe Dates* program meets all these criteria (De Grace & Clarke, 2012). Of all interventions in peer-group settings, school-based programs (i.e., K-12 and college)

were most common, and they involved influential peer interventions and young adult programs during health and physical education classes (Pittman, Wolfe, & Wekerle, 2000; Watts, 2016). School-based program implementers work with school systems to implement evidence-based interventions (Teten et al., 2009). Of note, program dosage, content, delivery styles, facilitators, sample sizes, study duration, theoretical base, and follow-up times vary extensively (Graham et al., 2019; Teten et al., 2009). Another criticism of school-based/curriculum-based programs calls into question their inability to plan for variations in gender, dating styles and TDV histories of participants, and self-efficacy to use learned skills in violent relationships (Debnam & Kumodzi, 2019; Levesque, Johnson, & Prochaska, 2017).

To their merit, school-based/curriculum-based programs are deployed in multiple sessions (i.e., more than one group meeting), and hence enjoy the benefits of multi-session programming that build on each other, including a high likelihood for attitudinal changes that are held for longer due to a dose-response effect (Graham et al., 2019; Pittman, Wolfe, & Wekerle, 2000; Watts, 2016). Moreover, school-based/curriculum-based programs are deployed in group session formats and so stimulate participatory discussion among participants and between participants and trained program implementers (Graham et al., 2019). In the following sections, some school-based intervention examples are described. These include specific middle-to-high school-based and college-based interventions, male-specific interventions, whole-family approaches with practice and program implications.

Middle- To-High-School Based Interventions

School-based interventions are carried out with the help of a dating violence prevention program tailored for students in grades 7 through 12 (De La Rue, Polanin, Espelage, & Pigott, 2016). Beginning in Canada and the United States in the mid-1980s (Tutty et al., 2005), school-based programs have become a sensible bargain for several reasons not limited to the fact that almost 50% of all youth dating violence occurs on school grounds (Molidor & Tolman, 1998). A growing number of evidence-based programs (using RCT) in school settings have been launched to target TDV.

However, most programs report inconclusive to moderately positive results in reducing TDV perpetration and victimization in terms of program effect sizes (Sanchez-Jimenez et al., 2018).

A foremost example is the *Safe Dates* program (Foshee et al., 1996), considered a standard-of-care model program by SAMHSA due to evidence of effectiveness and wide acceptance (see Foshee et al., 2014). According to longitudinal data, the Safe Dates program for Middle and High School students saw a decrease in sexual and serious physical violence perpetration, as well as dating violence victimization among students (Foshee et al., 2014). *Fourth R: Skills for Youth Relationships* is another well-cited school-based (universal prevention) program involving a 21 lesson/28-hour curriculum (Wolfe et al., 2009). The *Fourth R* was a teacher-led curriculum that focuses on the complexities of dating violence, healthy relationships, personal protection, and injury prevention, as well as drug use and abuse prevention (Wolfe et al., 2009). An appraisal of *Fourth R* revealed the intervention effect was more significant in boys at 2.5 years follow-up, reducing physical dating violence from the previous year and increasing condom use among boys. Both *Safe Dates* and *Fourth R* report low to moderate effect sizes for victimization and perpetration reduction (ranging from -.19 to -.49) (Sánchez-Jiménez et al., 2018).

Other funders start programming as early as high school. For example, the Robert Wood Johnson Foundation's (RWJF) *Start Strong: Building Healthy Teen Relationships* initiative, in partnership with Futures Without Violence (FWV) and Blue Shield of California Foundation (BSCF), was the most important initiative ever supported (investment of \$18 million from 2008 to 2012). The *Start Strong* program focused on TDV early prevention activities, healthy break-ups, healthy relationship promotion, peer leadership, incorporating youth-led media campaign programs among 11- to 14-year-olds in eleven program sites across the US. Teens in the Start Strong schools showed reduced acceptance of TDV, improved attitudes toward gender parity, reduced bullying (in at least one wave of follow-up), increased parent-child contact about relationships, and increased support and satisfaction in teen relationships, according to a third-party assessment (RTI International). Furthermore, five Start Strong program sites reported significant TDV-related changes in school

district policy, while all eleven Start Strong sites reported sustained post-program practice changes across the board (RTI International, 2013). Mentoring and after-school programs enable at-risk youth to receive positive model mentorship from adults and empowered bystanders in the community who understand their unique experiences while offering relatable problem-solving strategies that support youth understanding of the signs of abuse, develop safety plans, and even become empowered bystanders at a young age when they are exposed to positive mentorship (David-Ferdon & Simon, 2014; David-Ferdon et al., 2016).

College-Based Interventions

Current dating violence studies oversample college-age students (age 18-24) – who are deemed easily accessible, albeit whose experiences are post-teen with potentially different sociodemographic characteristics (Giordano et al., 2010). Youth in this age range are described as young adults (Arnett, 2006) and provide a pragmatic cohort to work with, given they are typically above age 18 and able to consent to participate in research and preventive programs. Due to the sensitive nature of TDV, violence researchers working with underage youth (<18 years) contend with practical challenges while conducting studies with adolescents who must provide assent, in addition to hard-won parental and school consent. Roger's (1975) Protection Motivation Theory (PMT) helps explain parental protection and apprehension around TDV programming. This is in part due to three critical essentials of PMT proposed by Rogers (1975): (a) the severity of the event, (b) the likelihood of event occurrence, and (c) parental self-efficacy to respond (see Black & Preble, 2016 for parental responses to TDV).

When organized initiatives are not aimed at adolescents (ages 13-17), they are extended to young adults in college. For example, to raise awareness about college sexual harassment, the Obama administration launched the "It's On Us" initiative (Office of the Press Secretary, 2015). This was followed by the My Brother's Keeper (MBK) campaign, which focused on critical life milestones that predict positive results in boys and young Men of Color. With a starting investment of \$150 million

and (pledges of over \$200 million) over five years, the MBK model was extensively adopted by numerous schools, youth groups, and school systems (Jarrett & Johnson, 2014).

Relationship & Sexual Violence Prevention (RSVP) initiatives such as the theory-based *Green Dot* campus bystander program (Coker et al., 2011, 2014) and *Bringing in the Bystander* program (Banyard et al., 2007) are designed to foster actual and observed self-reported bystander behaviors among youth, considering that a focus on reducing sexual violence is essential but inadequate without changing normative behaviors in college ecosystems (Coker et al., 2011, 2014). Because of the high prevalence of sexual harassment on college campuses, particular programs target naturally occurring male-only social networks (e.g., brotherhoods, football men, fraternity males) that are at risk for coercive and aggressive sexual activity compounded by group-endorsed traditional male domination, rape myths, gender stereotypes (“boys cannot be victims”), and rigid masculine attitudes (Choate, 2003; Marquart et al., 2007) – all values considered harmful by the APA, who released their first-ever guidelines for practice with men and boys in 2019 (Pappas, 2019).

Noted limitations of bystander programs include their inability to offer more than marginal long-term reductions in campus violence, even as they have been advertised to change short-term attitude on partner violence and gender parity (DeGue et al., 2014; Hickman et al., 2004; Salazar, Vivolo-Kantor, & Schipani-McLaughlin, 2019). These limitations arise from the well-known small dosages of bystander programs often using one-off in-person workshops (“average length of 68 min”), the diversity of college youth, and potentially narrow theoretical fundamentals that govern some programs (DeGue et al., 2014, p. 9; Salazar, Vivolo-Kantor, & Schipani-McLaughlin, 2019). Moreover, with the noted high cost of using proprietary bystander program curricula and material, several local programs are self-starting and grounded in circumstantial or nativist ideologies lacking any evidence base (Nation et al., 2003).

Done correctly, large-scale school-based comprehensive programs getting federal funding can circumvent these limitations by designing extended (high dosage) well-founded programs with a widespread reach. A foremost example is the CDC’s Dating Matters™ (O’Leary and Slep 2012).

Dating Matters™ was designed for high-risk youth (ages 11-14) in urban communities, developed as a multi-component prevention program for individuals, peers, families, schools, and neighborhoods to prevent the onset of TDV (O’Leary and Slep 2012). In addition to using a comprehensive tactic - attending to all levels of the social ecology - CDC’s Dating Matters™ targets co-occurring risky behaviors linked to various forms of dating violence (Tharp, 2012). Other noted college-based programs include *Break the Cycle* and *Love is Respect* (Ybarra & Mitchell, 2013). However, this level of comprehensive programming is historically suboptimal or non-existent in rural settings.

Male-Specific Interventions

In line with school-based programs, recent gender-sensitive and gender-transformative initiatives utilize male-programming as a primary and secondary prevention strategy to achieve positive outcomes —a women-led initiative. A WHO report found “discussions of gender equality, power, and violence are most open and effective in single-sex groups.” (Harvey, Garcia-Moreno, & Butchart, 2007). Male-facing programs endeavor to be culturally sensitive and intersectional (i.e., sensitive to underlying inequalities and macro-level determinants of adolescent health such as income, rurality, disability, gender, and age) (Flood, 2018). Targeting only boys and men alone is a restrictive enterprise (Kato-Wallace, Barker, Sharafi, Mora, & Lauro, 2016), but is not uncommon as a prevention strategy (Foshee, McNaughton Reyes, & Ennett, 2010). This is signaled by recent generational shifts and benefits linked to changing attitudes on gender equality (Peacock & Barker, 2014).

When tested, male-specific programs have shown merit, as signaled by a systematic review by Ricardo, Eads, and Barker (2011). For instance, the theory-centered Coaching Boys into Men (CBIM) program – by the Futures without Violence group - was developed and tested (i.e., using a cluster-randomized study of 16 NYC schools, 9-11 grade) against a coaching-as-usual control group (Graham et al., 2019; Miller et al., 2013). Launched in 2001 as a national media campaign, the CBIM curricula involved an eleven-session (10–15 min) collegiate coach-led intervention designed for weekly group delivery to high school male athletes (Graham et al., 2019; Miller et al., 2013). The

CBIM study considered their contexts of peer socialization around harmful gender norms and promoted non-violence, respect for women, and bystander self-efficacy (i.e., positive bystander behaviors to intervene when witnessing GBV; see Miller et al., 2013). The study's preliminary 12-week assessment revealed no statistically significant difference in perpetration between the CBIM and non-CBIM classes (Miller et al., 2013). A second 12-month follow-up, on the other hand, revealed a modest decrease in overall partner aggression as well as negative bystander behaviors (e.g., apathy and violence acceptance), but not in attitudes toward harassment (Miller et al., 2013). In another study, Jamie et al. (2016) used a coach-led vs. advocate-led cluster randomized design and discovered no statistically significant discrepancies between coach-led and advocate-led clusters at baseline and 3-months post-intervention, implying that using a trustworthy and influential adult facilitator that adolescent males admire, in this case, college sports coaches, could be beneficial.

Other broadly recognized male programs include Men of Strength (MOST) Clubs, Because We Have Daughters (BWHD), Promundo's *Manhood 2.0*, *Program H* (recognized by WHO and UNICEF), White Ribbon Campaign, Founding Fathers Campaign (by Futures Without Violence), and the Engaging Men Grant Program. MenEngage is another well-known international men's initiative that has over 700 non-governmental organizations and country partners (Flood, 2019).

Male-focused programs share commonalities in their characteristics. Most of these programs incorporate primary, secondary, and universal prevention tactics to maximize results across the lifespan, that is, from boyhood to manhood. These projects are groundbreaking at the national and international levels because they use non-curricular methods to involve both men and boys in conflict reduction, ally building, and the dismantling of rigid gender roles in low-income local communities around the world. Non-curricular approaches target men and boys without formal pedagogic strategies in spaces where they regularly meet, such as the workplace (e.g., workplace awareness initiatives), sport and recreation clubs, health centers, and community hotspots (Flood, 2018). These programs deliver group psychoeducation using customizable toolkits, youth-led/male-facing social campaigns, and “bottom-up” community mobilization, invariably addressing TDV at all

socio-ecological levels of impact within a context of persistent economic disadvantage (Flood, 2018, 2019).

Other interventions are intentionally gender-specific using a secondary prevention approach and a feminist lens (i.e., focusing on females-only victims) (Giordano et al., 2010). However, they ignore the complicity of overarching gender norms not addressed in app design (Bivens & Hasinoff, 2017). However, a shortcoming of this approach is that they respond to women and young girls after the abuse have already happened (Capaldi & Langhinrichsen-Rohling, 2012; Debnam & Kumodzi) while retro-fitting interventions to cater for male survivors and perpetrators.

There are arguable considerations for the demerits and benefits of mixed-gender groups and same-gender groups (Elias-Lambert, Black, & Sharma, 2010). Studies favoring same-gender program claim a higher likelihood for program effectiveness in the absence of cross-gender interferences (Choate, 200; Gidycz et al., 2001; Johansson-Love & Geer, 2003), especially for programs targeting changing attitudes, increased empathy, bystander self-efficacy, and awareness of sexual violence (see meta-review by Vladutiu et al., 2011). Some report considerable increases in positive behavior change with all-male groups (Brecklin & Forde, 2001; Foubert & Newberry, 2006; Laing, Humphreys, & Cavanagh, 2013; Milhausen, McBride, & Jun, 2006). Studies comparing mixed vs. same-gender groups show higher participation and satisfaction with mixed-gender groups than with same-gender cohorts (Elias-Lambert, Black, & Sharma, 2010).

Critics challenge the efficacy of male-focused interventions (Morris et al., 2008; Pease; 2008; Campo & Humphreys, 2017). Specifically in their ability to alter violence-prone attitudes and then actual behaviors in general (Brecklin & Forde, 2001; Elias-Lambert, Black, & Sharma, 2010; Flood, 2018; Foubert & Newberry, 2006; Milhausen, McBride, & Jun, 2006). Anderson and Whiston (2005) report college-aged males benefitted more from mixed-gender studies, whereas college-aged females benefitted the most from same-gender groups. Of note, outcome measures - to gauge program effectiveness and satisfaction – vary widely across these studies, making a clear comparison of mixed vs. same-gender groups problematic (Elias-Lambert, Black, & Sharma, 2010). Other scholars point

the focus on individual levels normative change, placing the onus of “agentic choices” on men while ignoring the social and structural determinants of partner violence (e.g., economic inequalities, race, discrimination) (Dworkin, Fleming, & Colvin, 2015). Dworkin, Fleming, & Colvin, 2015) also described other limitations of this gender-transformative approach to include a focus on the men-as-perpetrator dominant paradigm ignoring men who are victims and the intersectional influences of race, class, gender, and sexuality on victimology and perpetration (Dworkin, Fleming, & Colvin, 2015). Also, ignore inherent differences in masculinities (Connell 1995; Connell & Messerschmidt, 2005; Dworkin, Fleming, & Colvin, 2015; Messner 1997); men’s concern for their own social disempowerment and loss of masculine identity (i.e., change from hegemonic to subordinated masculinity statutes) with women empowerment, and the societal response to a ‘changed men’ in communities with high fidelity to traditional gender norms and lack of synergistic policies and programs to support gender-transformative interventions (Dworkin, Fleming, & Colvin, 2015).

Notwithstanding the pros and cons of male-only TDV programming, this type of programming may be highly advantageous, particularly in rural communities still prone to traditional gender and social norms. The same can be said for rural communities with high social cohesion (everybody knows everybody’s business), thereby precluding confidential abuse disclosure and help-seeking. While nonmonolithic, most rural communities maintain higher fidelities to traditional values and gender norms still integral to daily life, making a case for the creation of norm-defying gender-specific services for male adolescents who prefer personalized and confidential support reflecting their lived experiences.

Despite these opposing viewpoints on mixed vs. same-gender classes, pressing issues related to male programming have been established in the literature. These include a lack of understanding of the dose-effect of interventions (whether in mixed or same-gender studies), insufficient replication of successful programs in too-diverse settings, a lack of longitudinal studies on the intergenerational effects of prevention, a lack of understanding of moderator variables other than gender, and poor integration of theory into practice in the development of behavior change programs (Banyard, 2014).

Other noted challenges include one-off programs (i.e., low dosage), participant self-selection (focusing on easy to reach groups, typically oversampling females), and the scarcity of long-term evaluative data on program effectiveness and sustainability (Hickman et al., 2004; White Ribbon Campaign, 2014).

Whole-Family Approaches (WFA)

The family is perhaps the single most influential social petri-dish for developing, testing, and maintaining gender norms and attitudes. Thus, the family unit remains a practical site for preventing the onset and transmission of maladaptive social and gender norms (Patterson, Reid, & Dishion, 1992; Phillips Smith et al., 2004; Tolan & Gorman-Smith, 1997). Though few interventions incorporate family in prevention (Eaton & Stephens, 2018), family-based programs usually operate in the framework of social work and family structures, emphasizing family support, healthy family functioning, and parental self-efficacy (Morris et al., 2008). Whole-family approaches (WFA) – a 360-degree outlook of the family as a systematized entity that is more than the sum of its parts – emphasizes the management of adolescent behaviors through non-intrusive supervision, active psychoeducation, observed learning, clear parent-youth communication, and appropriate rewards for prosocial behavior (Morris et al., 2008).

As a newly emerging approach to responding to family violence among family practitioners (particularly those in Europe and Australia) (Stanley, 2017), WFA “offer opportunities to focus on shared needs, develop [intra-family] strengths [while addressing] risk factors that could not be dealt with through a focus on family members as individuals” (Morris et al., 2008, p. 6). Done correctly, WFA consider the multiplicative effect of family violence on all member of the family, going beyond just the spousal dyad (i.e., victimized mothers and abusive fathers) (Stanley, 2017). WFA often requires multi-disciplinary strategies such as home visitation, restorative justice, parenting skill-building, and child protection services (Stanley, 2017). Although couples counseling is a precarious and highly contended solution owing to the impaired safety of victims, some scholars suggest newer

modalities such as “multi-couple counseling in groups” (Campo & Humphreys, 2017, p. 9 citing McCollum & Stith, 2008).

However, the intergenerational and family-derived nature of partner violence places WFA as a crucial strategy for the prevention of TDV, parent-to-teen abuse, and even teen-to-parent abuse. Whole-family approaches utilize integrated prevention modalities that take into consideration the social ecology of intervention end-users (Morris et al., 2008). WFA also incorporates intra-family relationships, intra-family dynamics (such as crisis and resilience), and syndemic factors (co-occurring issues) related to family violence (“involving any combination of members, adults or young people” Morris et al., 2008, p. 42).

Criticism of WFA. A foremost criticism of the WFA is that they do not cater to essential family needs, assume normative depictions of what characterizes a *family*, and are maladaptive to non-normative family types (Morris et al., 2008). It is worth noting that the concepts of family and family values are also hotly debated (Morris et al., 2008). Today, family formations can be actively dynamic, transitory (e.g., chosen families), and progressively non-normative. Emergent family systems include single-parent homes, same-sex parents, custodial grand-families, divorced families, blended families, teen parents, etc., making a case for tailored family-responsive programs (David-Ferdon & Simon, 2014). Still, academic, legal, policy, and societal descriptions of *families* consistently exclude high-risk youth in foster care, LGBTQ+ youth (who report higher TDV rates of their heterosexual peers; Dank et al., 2014), emancipated youth, youth offenders, and other hard-to-reach groups (e.g., homeless or unstably housed youth, pregnant teenagers and teenage mothers) and other groups facing impediments to using healthcare services. Youth in their ‘chosen’ families (or family of choice) also face extraordinary social exclusions (Morris et al., 2008; Wyss, 2004). Also challenging is the normative notion of *gender* (a contentious concept), leading to the systematic isolation of gender non-binary non-conforming youth in dating violence research (Morris et al., 2008; Wyss, 2004). Theoreticians criticize outdated and automatic family systems theories (e.g., the Structural Functionalism paradigm and Bowen’s (1978) family systems approach) designed for *intact*,

romanticized, two-parent heterosexual households, with rigid gender role expectations untenable in today's realities (Brown, 1999; Pam, 1993; Smith & Hammon, 2017).

On the other hand, emancipatory person-centered paradigms such as the Social Exchange Theory (see Blau, 1964; Homans, 1984) have dispensed with these rigid gender role expectations. These emancipatory perspectives help explain *families* as a harmonized system, where person-centered subsystems – parents, parent-adolescent, adolescent-siblings, and adolescents-alone – operate interdependently to meet shared goals governed by principles of family systems (e.g., family norms, homeostasis (or balance), communication, and circularity - connoting family cycles) to maximize benefits and minimize cost (Connard, Novick, & Nissani, 1996).

Furthermore, parental support and positive youth involvement remain significant protective factors against TDV victimization and perpetration (Banyard, Cross, & Modecki, 2006; Latzman et al., 2015), making parental involvement a key component of TDV prevention using a whole-family and life course approach. Even recently, programs utilizing a WFA have shown useful promise (Foshee et al., 2012; Foshee et al., 2014; Leidy, Guerra, & Toro, 2010). For example, family-based programs such as the *Families for Safe Dates* (FSD), *Dating Matters*[™] (Tharp, 2012), *Moms and Teens for Safe Dates* (Foshee et al., 2015) report favorable TDV outcomes when implemented with parent-child dyads or using whole-family campaigns. These programs are gaining acceptance as TDV becomes a shared worry for families and their communities (Stanley, 2017).

In the United States, a program called Families for Safe Dates (FSD) is regarded as a model family-based program. FSD is designed for teens (ages 13-15) and their parents to change behaviors and acceptance of violent behavior, as well as increasing parental self-efficacy to positively identify and respond to TDV without overreacting and infantilizing their adolescents (Black & Preble, 2016; Niolon et al., 2017). Parental awareness and knowledge about TDV and subsequent communication skills are central targets of family-based interventions (Niolon et al., 2017). Using a cross-cutting educational approach, universal prevention programs target abusive men as fathers in general, as abusive men continue to play fathering roles (Campo & Humphreys, 2017; Stanley, 2017). They also

incorporate substance use, sexual/reproductive health education, positive communication (e.g., consent), women empowerment, skill-building (e.g., conflict resolution), bystander efficacy, and help-seeking strategies as part of a comprehensive intervention package (Stanley, 2017; Wolfe et al. 2009).

Victim-Centered Restorative Justice

Other variants of family-based programs emphasize healing, resiliency, victim-centering, transformative justice, and other non-pathologizing approaches to restorative justice (also known as Family Group Conferencing [FGC] see Campo & Humphreys, 2017). When practiced correctly, restorative justice is proactively coupled to existing cultural values and practices so that the WFA intervention is a voluntary, cooperative, and transcultural agreement and not a mechanistic imposition on the family unit. For example, the practice of Navajo Peacemaking, which is widely used in Indigenous jurisprudence and Indigenous Indian restorative justice (Coker, 2006), is a model of restorative justice, as is the Mana Social Services Pre-Sentencing Restorative Justice Program, which is used in Indigenous Māori contexts (Campo & Humphreys, 2017 citing Hayden et al., 2014).

Described by Coker (2006) as a beneficial cultural practice, Navajo Peacemaking in family violence remediation is directed by informed Indigenous authorities, often without the influence of law enforcement and non-Indigenous parties (Coker, 2006). Navajo peacemaking is practiced as a family-oriented, divorce-averse, healing strategy that provides material and social support for victims, holds abusers responsible while considering their contexts of oppression, and maintains tribal sovereignty (Coker, 2006). On the other hand, an evaluation of the Māori New Zealander Mana Social Services pre-sentencing restorative justice program indicated victims accepted the program and valued its intent, the support of the program facilitators, and valued the change in their partners on account of the program (McMasters, 2014). However, while victims indicated satisfaction with this program, perpetrators in the Mana program displayed hesitation (or refused) to share their opinions on the program (McMasters, 2014). Follow-up data (“from police report”) disclosed that 87% of perpetrators met conditions for the program and reported reduced recidivism (McMasters, 2014).

Compared to other modalities for batterer rehabilitation, this program showed demonstrable benefits for perpetrators and victims.

However, with noted shortcomings, Coker (2006) raised concerns for using this type of restorative justice praxis. Shortcomings include the likely coercion of victims to forgive, safety concerns where victims chose to meet their abusers, safety concerns for violence interventionists around abusers, and an antiquated focus on family preservation/anti-divorce bias at any cost – all detrimental to the victim’s safety and their children’s wellbeing and undermining of the restorative justice praxis (Stith & McCollum, 2011). Other critics point to the low-dose and short-lived nature of restorative justice interventions, thus undermining the entrenchment of power and control in abusive relationships and undermining victim needs while focusing on abuser forgiveness/perpetrator accountability (Campo & Humphreys, 2017). Instead, Coker (2006) recommends best practices for restorative justice to include (a) priority of victim safety over batterer rehabilitation; (b) delivery of both material and social support for victims, (c) restoration as part of a coordinated community response; (d) unequivocal condemnation of the use of violence; and (e) desistance from forgiveness as a definitive goal of restorative justice (Coker, 2006).

Though well-intentioned, restorative justice praxis may disturbingly ignore youth from historically disadvantaged backgrounds or overcorrect by oversampling families of color in discriminatory and classist domestic violence responses (Emezue, Williams, & Bloom, 2019; Morris et al., 2008; Waller, 2016). Moreover, critics rightly call into question the safety and wellbeing of family members (mainly of female violence survivors) in programs that use WFA, without adequate measures to ensure mothers and their children safe from retributory harm and abuse during or after WFA intervention (Morris et al., 2008; McGinn, Taylor, & McColgan, 2019; O’Doherty et al., 2014; Pence & Paymar, 1993; Wojnicka et al., 2016).

Research on other non-traditional families run by caregivers (who are not direct parents) is also limited. Engaging families in prevention work is still a tall order, as families may not immediately perceive the importance of attending programs, by deflection of WFA strategies, may not recognize

problems with their teens, may distrust support services, may experience barriers to full involvement, and contend with competing demands on their time and resources (Phillips Smith et al., 2004; Stanley, 2017).

Parental & Caregiver Responses to TDV

Of note, parental involvement is implicated in protecting from TDV (Akers, Yonas, Burke, & Chang, 2010; Gorman-Smith et al., 2004; Miller et al., 2009). However, most parents describe an incapacity to respond to TDV successfully (Black, Weisz, Preble, Sharma, 2015). Other parents chose to believe their teens were not dating, overestimated their teen's ability to make the *right* choices, were too embarrassed to discuss TDV, or predicted their teens would learn from experience (Akers, Yonas, Burke, & Chang, 2010; Black, Weisz, Preble, Sharma, 2015 citing Rothman et al., 2011). In their mixed-method study of parent-teen dyads, Black and Preble (2016) found that parent-teen dyads understood the obligation to promptly address TDV (particularly mothers, Black, Weisz, Preble, Sharma, 2015; Rothman et al., 2011), as well as the severity, prevalence, and patterns of TDV – again, more so with mothers (Black, Weisz, Preble, Sharma, 2015). Thus, parent-teen dyads suggested open communication as a preferred strategy for preventing and responding to TDV (Black & Preble, 2016; Rothman et al., 2011).

However, parent-teen dyads diverge on the exact content of conversation delivered following TDV events (Black & Preble, 2016). While parents were open to conferring with their teens on topics of healthy and unhealthy relationships (even volunteering stories from past experiences), teens were less likely to recommend this particular subject matter, perhaps favoring a less direct approach, such as discussing *options* for responding to a TDV event but leaving final decision-making to them (Black & Preble, 2016). It is worth noting that middle school students are more likely to follow and use parental guidance on positive and dysfunctional relationships (Black & Preble, 2016), whereas high school teens prefer self-governing decision-making with a wide berth for self-autonomy (Black & Preble, 2016). There were no gender differences in endorsing parental responses to TDV (Black & Preble, 2016). Commonly parenting strategies include barring

relationship with the abuser, stressing a “look on the bright side” attitude, intentionally talking with their children, recommending they share problems with peers (more so with uneducated parents), and involving law enforcement, particularly in severe TDV cases where a weapon was involved or in physical assault (Black, Weisz, Preble, Sharma, 2015). Parents least endorsed disciplining teens, for example, by *grounding* them or barring them from dating (Black, Weisz, Preble, Sharma, 2015). African American parents, mostly mothers, seemed more protective of daughters than sons (a state described by Bronfenbrenner as “overtaming”), fearing victimization of females while also stressing self-respect, self-esteem, prospectively anticipating violent behaviors by males as corroborated by lower levels of discipline, scrutiny, and protectiveness (“undertaming”) (Akers, Yonas, Burke, & Chang, 2010; Darling, 2007; Eaton & Stephens, 2018). This level of protectiveness can also hinder abuse disclosure among African American youth (Eaton & Stephens, 2018). Parent-initiated instruction also centers on past family histories of sexual violence as cautionary tales (Akers, Yonas, Burke, & Chang, 2010). The *Jezabel stereotype*, positioning Black girls as lascivious and hypersexual, also plays up in parental attitudes towards TDV as well as in their instructions against TDV.

Irrespective of these cultural nuances, adolescents often solicit parental involvement so long as they find this process helpful and pragmatic, particularly where parental styles are balanced (i.e., supportive, warm, and comforting) (Black & Preble, 2016; Olsen & Gorall, 2003). Families that operate at extremes, or mitigate youth socioemotional *flexibility* and *cohesion*, thus, pushing adolescents to prefer external sources of social support – e.g., social media and social networks. Thus, while parenting styles enjoy different levels of acceptance across cultures, they can constitute extremes too.

Parenting styles socialize adolescents to the prevailing culture, often ensuring adolescents are well-adapted to what is considered socially acceptable behaviors (Patten, 2000). Adolescents, in turn, interpret parenting styles via cultural lenses that shape their understanding, perceptions, beliefs, and intention to conform (Patten, 2000). Disruptions in family rules may also receive different degrees of rewards or punishments across cultures, making culture a significant influencer of parenting styles and, subsequently, adolescent behaviors.

McHale, Updegraff, Tucker, and Crouter (2000) go even further, finding in their research that the amount of time parents spend with sibling dyads is linked to the quality of the relationship. Sometimes, parental engagement is divided along gender lines, with fathers spending more time with brother-brother dyads and mothers spending more time with their children in general. In some instances, fathers are expected to model positive male roles for sons and be examples of the right partner for daughters (Akers, Yonas, Burke, & Chang, 2010). Parental messaging was framed for female-only victims (bothering on victim-blaming and lack of self-respect) and male-only abusers, often excluding messaging for same-sex, gender non-conforming teens, and male victims abused by females (Akers, Yonas, Burke, & Chang, 2010).

Even in families where positive parenting practices are the norm (e.g., warmth, advice, connectedness, positive communication), adolescents avoid parental involvement in sensitive aspects of their lives. If dating relationships are hard to talk about, TDV conversations are more challenging and are often met with shock and disbelief by parents who claim their teenagers are the exception (Black & Preble, 2016). Although there are no substantial differences in parental participation levels or response efficacy (or parent's confidence in their own ability to help a TDV engaged youth) between rural and non-rural adolescents, research conducted with parents reveal difficulties with parent-teen communication regarding dating abuse, healthy relationships, assertive attitudes, and romantic feelings. Although there are no substantial differences in parental participation levels or response efficacy (or confidence in one's own ability to help a TDV engaged youth) between rural and non-rural adolescents, research conducted with parents, reveal difficulties with parent-teen communication regarding dating abuse, healthy relationships, assertive attitudes, and romantic feelings. Most parents remain unaware of what assets or resources they can implore for informed support (Preble, Black, & Weisz, 2018). Few prevention programs leverage parents as trusted key players and *interventionists* in the prevention of TDV victimization and perpetration. Still, only a handful of studies have addressed TDV linked to parenting practices outside of exposure to family violence (Latzman et al., 2015). With replete studies focusing on socio-structural and socioeconomic

limitations in rural areas (e.g., shortage of health providers, high social cohesion preventing anonymous youth services), it begs to think that resources supportive of parental self-efficacy and response efficacy are scarce.

Among African American and Latino male adolescents, poor parenting practices (e.g., discipline and monitoring) and low emotional cohesion in families have been linked to a high risk of exposure to neighborhood violence (Gorman-Smith et al., 2004). However, these findings come from urban samples. Positive and balanced parenting practices, as well as parental emotional and instrumental support, serve as protective factors against TDV victimization and perpetration. Positive intrafamilial support may enhance the biopsychosocial well-being of developing adolescents experiencing unhealthy dating relationships. However, parental roles as part of a *whole family* (or family-led) strategy for preventing dating violence are not well characterized among rural families. This awareness is critical for the implementation of dating violence prevention services, as well as future programming goals based on the best available evidence to incorporate rural parents as anti-violence agents in systematic approaches aimed at preventing the onset and maintenance of rural TDV.

Some interventions allow for parental support through digital platforms that monitor for signs of abuse and abusive experiences. Apps like Life360, Watch Over Me, and FamilyConnect.net Mobile (to monitor all text messages, including deleted ones) are typical examples (Bivens & Hasinoff, 2017).

Overall, studies show that adolescents, rural or not, require experience-based guidance in dealing with complex interpersonal issues. Contrary to popular stereotypes, adolescents are not wholly averse to parental advice or expert adults' consultation; however, and when they do seek parental support for dating violence, mothers and grandmothers are frequently consulted where a history of open communication and trust has been established (Black & Preble, 2016; Eaton & Stephens, 2018; Spencer & Bryant, 2000).

Drawbacks of Current TDV intervention Approaches

Current approaches have only minor, short-lived impacts (De Koker et al., 2014; De La Rue et al., 2016; Taylor et al., 2013). Specifically, TDV interventions produce inconclusive results with reports of best outcomes varying by intervention dosage, gender and dosage configurations, intervention settings, population types, and program designs (Graham et al., 2019). Some dating violence researchers point to divergences in TDV outcomes based on program length, methodological models, and paradigmatic approaches (Sánchez-Jiménez, Muñoz-Fernández, & Ortega-Rivera, 2018). In addition, current dating violence research funding priorities and federal policies have been diminished with a snowballing tolerance for gender oppression and restriction on the sexual and reproductive rights of women (Rothman, 2018).

Miller et al. (2013) argue that while well-intentioned, current interventions marginalize specific high-risk youth cohorts (e.g., low SES rural/minority youth, early adolescents due to the sensitive nature of TDV, and non-English speaking youth). Further, current TDV evaluation programs are conducted with urban cohorts in high-income countries (Ellsberg et al., 2018). Other dating violence researchers raise concerns about inherent programmatic weaknesses, citing the failure of existing initiatives to fulfill any of the nine characteristics associated with successful preventive programs (e.g., multicomponent; varied teaching methods; theory-driven; appropriately timed; sociocultural relevance; staff efficacy; and outcome evaluation) (Cissner & Ayoub, 2014; De La Rue et al., 2014). In a secondary quasi-experimental sample of 570 students, for example, the Fourth R program had little to moderate effect on minimizing dating abuse, peer violence/bullying, or drug and alcohol use (Cissner & Ayoub, 2014). However, the same study showed delays in sexual activity, a decrease in bullying, and attitudinal change among students with the most exposure to the curriculum (i.e., dose-dependency) (Cissner & Ayoub, 2014). Evidence-based programs carried out in North America show effect sizes of .47 for post-intervention TDV attitude change, but not behavior change (De La Rue et al., 2014; Sanchez-Jimenez et al., 2018), indicating any impact of intervention diminished with time.

In terms of coverage, school-based programs fail to account for out-of-school youth, youth without parental consent, not to mention they are problematic to insert into school activities (Giordano et al., 2010; Levesque, Johnson, & Prochaska, 2016). Furthermore, school-based curricula can be expensive to procure and implement with fidelity, with expenses accruing for program materials and photocopying handouts/posters. Some dating violence researchers criticize school-based programs for taking over pre-planned class time, anticipating school staff (e.g., teacher, counselors, psychologists) training, efficacy, and cooperation (Levesque, Johnson, & Prochaska, 2016, p. 2). These programs also require additional logistics, not to mention varying levels of fidelity with teacher-administered TDV curricula; in some cases, teachers are expected to voluntarily participate in the program (Levesque, Johnson, & Prochaska, 2016, p. 2).

A study of a national sample of US high school principals ($n = 750$) showed 68% had no formal training on TDV, 76% did not have a standard plan for responding to TDV episodes or assisting victims (62%) (Khubchandani et al., 2017). In the same study, 65% of the sampled schools lacked any violence prevention policy explicitly responding to TDV; 57% of high school principals referred students experiencing TDV to the school counselor (93%), used parent notification (85%), and police involvement (74%) (Khubchandani et al., 2017). These are noted strategies that inadvertently reduce the likelihood that victims will disclose abuse. Over 73% of US high school principals do not ratify any disciplinary measures against perpetrators (Khubchandani et al., 2017). Most principals in this study agreed that a lack of training and appropriate protocols to respond to TDV incidents were common barriers (Khubchandani et al., 2017).

Engaging Men and Boys in Allies in TDV Prevention: A Likely Answer

The use of gender-specific approaches focused on constructively engaging men and boys as partners, enforcers, and co-benefactors of gender-based violence prevention work is a pioneering strategy for preventing TDV (DeGue et al., 2014; Flood, 2018; Jewkes, Flood, & Lang, 2015; Wells et al., 2013). Over the last two decades, attempts to involve men and boys have yielded significant results that not only affect men and boys' lives but also ensure gender equality for the women and

girls in their social convoy (Flood, 2018; Kato-Wallace, Barker, Sharafi, Mora, & Lauro, 2016). The catchphrase “engaging men and boys” has become something of a buzzword in the creation of ally movements and social justice efforts around violence against women.

Whereas the current solution to violent men is to enforce criminal punishments, proactively engaging men (through fatherhood and parenting) and boys (through awareness-raising) can help to deter abuse. This approach is maximized using a strengths-based approach (i.e., empowerment, not disempowerment) (Kato-Wallace, Barker, Sharafi, Mora, & Lauro, 2016). Most anti-violence campaigns target fatherhood as a beneficial entry point for raising boys who respect and value women (Renzetti, Follingstad, & Coker, 2017). Men and boys, on the other hand, are not a homogeneous category, as they exert power and influence in various ways depending on the situation and their affiliation to the predominating hegemonic masculinity (Kato-Wallace, Barker, Sharafi, Mora, & Lauro, 2016). Therefore, they require various tailored programs and culturally relevant pedagogy, as “adult-centric” programs are inapplicable to boys and emerging adults (Kato-Wallace, Barker, Sharafi, Mora, & Lauro, 2016), and westernized programs invariably replicate the insensitivity and discriminatory nature of social oppressions (Emezue, Williams, & Bloom, 2019; Waller, 2016).

While promising, gender-specific interventions remain sparsely tested in *real-life* contexts – beyond their altruistic intent (Campbell, Neil, Jaffe, & Kelly, 2010; Wells et al., 2013). Though, emerging evidence presents this strategy as a sensible rationale for gender-specific interventions and a missed opportunity for intervention (Kato-Wallace, Barker, Sharafi, Mora, & Lauro, 2016; Miller et al., 2013; Wells et al., 2013). Specifically, Flood (2018) describes three rationales for why we need to engage boys and men:

- A. Boys and intimate male partners are primary perpetrators of GBV (Archer, 2000; Tjaden & Thoennes, 2000),
- B. Gender norms, cultural scripts on manhood, and power inequalities are deeply enmeshed in existing cultures and vastly influential on violence against women, and

C. Boys and men stand to benefit personally and interpersonally from male-focused programming (p. 87-89).

Gender-specific interventions are of importance as they target male entitlement and privilege, promote non-violence, encourage positive bystander behaviors, using a critical public health strategy to encourage positive schemas of masculinity (Kato-Wallace, Barker, Sharafi, Mora, & Lauro, 2016; Wells et al., 2013).

In 2011, the need to engage men and boys in existing social networks led the U.S. Office on Violence Against Women (OVW) to create the ground-breaking *Engaging Men Program*. The Engaging Men Program is a nationwide grant that assists local organizations in combating sexual harassment, domestic abuse, dating violence, and stalking among men and boys (DOJ, 2011). Of note, tailored engagement strategies transcend biological sex as a basis for intervention, and thus, focus on the socially loaded construct of power and control in gendered relationships (Hankivsky, Springer, & Hunting, 2018). Therefore, this study critically considers the complicated social status of *gender* as a “property of social norms, relationships, structures, ideologies, etc., rather than something a person embodies” (Hankivsky, Springer, & Hunting, 2018, p. 2) over one-dimensional descriptors of biological *sex*.

In addition to using this inclusive approach, programs engaging boys and men must jointly operate at different levels of the Spectrum of Prevention as prescribed by Davis, Parks, and Cohen (2006) and Cohen and Swift (1999): (1) fortifying knowledge, attitudes, and beliefs; (2) promoting mass awareness and psycho-education; (3) educating local service providers; (4) engaging, empowering, and rallying communities; (5) revamping organizational policies; and (6) influencing regional policies and enactment of legislation (p. 7).

Individual-level behavior change programs are a frequent target of interventions focused on fortifying personal knowledge, attitudes, and interpersonal skills with consideration for prior exposure to family violence (predictive of future violence), co-occurring risky health behaviors, youth conduct problems, and parenting practices (Flood, 2018). However, individual-level programs offer

the least evidence of effectiveness, making a case for comprehensive strategies scalable to co-occurring social issues linked to TDV (Flood, 2018).

Higher-order approaches, on the other hand, illustrate violence-prevention pragmatism by working with men and boys to avoid gender-based violence while also discussing the complexities of girls' and women's lives (Peacock & Barker, 2014). Men's views about co-issues such as gender equity, sexual and reproductive rights, hegemonic masculinities, and men's use of abuse are all shifting as a result of their efforts (Kato-Wallace, Barker, Sharafi, Mora, & Lauro, 2016). Examples of higher-order prevention efforts include:

- A. STRYVE: Striving to Reduce Youth Violence Everywhere - a CDC initiative to prevent youth violence (CDC, 2011).
- B. CDC's Rape Prevention and Education (RPE) program (funding state and territorial health departments in all US states, and the District of Columbia, Puerto Rico, and the U.S. Virgin Islands).
- C. Academic-community collaborations such as the CDC's National Centers of Excellence in Youth Violence Prevention (YVPC).

However, there are challenges with these types of programs. These include ideological resistance and aversion to programs with messaging around gender equity and gender justice (Flood, 2018). Useful approaches to alleviate these challenges include framing program messages around oppressions experienced by both men and women, personifying the adverse outcomes of female subjugation, speaking to men's concerns on changing gender roles, acknowledging male entitlement, and encouraging thoughtful reflection on problems that affect girls and women, and by extension families and communities (Flood, 2018; Renzetti, Follingstad, & Coker, 2017).

Nevertheless, male-facing interventions are not without controversy (Flood, 2018). Critics argue against this renewed focus on male-focused prevention that may supplant (i.e., detract from) the voices, leadership, and opinions of female survivors, as well as fuel polarizing and reductionist debates on gender symmetries (vs. men's violence against women) using a 'counting blows' outlook

that positions men and women as equally matched victims and abusers (Flood, 2018; Morris et al., 2008; Pease; 2008). Critics argue male-focused programs undermine vital resources for ending GBV and create competition for scarce funds to protect survivors (Minerson et al., 2011; Peacock, 2012; Pease; 2008). Moreover, some scholars have called into question the overall efficacy of engaging men and boys (Graham et al., 2019). Graham et al. (2019) argue that unified standards for developing program content, implementation mechanisms, research designs, and outcome measures to be delivered in various user contexts are still lacking, citing substantial variation across perpetration prevention programs for boys and men.

So far, this dissertation has underscored the need for strategic interventions that cater to *all* youth, particularly those at the highest risk. While most rural AYA meets the above criteria, dating violence research on rural male AYA is particularly scant. One promising approach to reach these vulnerable youth (i.e., those at most considerable risk of TDV) is through digital TDV interventions. Of note, programs to reduce digital abuse and online dating violence among teenagers remain in their emergent phase but show promising results (Debnam & Kumodzi, 2019; Sánchez-Jiménez, Muñoz-Fernández, & Ortega-Rivera, 2018).

Of note, mixed-gender studies are beneficial in that they allow the narration of lived realities, as they occur in the 'real' world among adolescents. The presence of dissent and agreement in mixed-gender focus groups also offer valuable insight into localized gender dynamics as they relate to dating habit, beliefs, and attitudes. However, mixed-gender studies are predisposed to confounding Hawthorne or the observer effects (i.e., individuals modifying their behavior due to an awareness of being observed or recorded) (Topping & Baron, 2009) or social desirability bias (faking good behaviors in a group setting) (Dalton & Ortegren, 2011). Social desirability is common in mixed-gender studies on sensitive, emotionally charged topics (Avery-Leaf et al., 1997), and from prior experiences, may pose a problem particularly in small rural communities with high social cohesion (everybody knows everybody's business) and where teenagers attend the same schools and belong to the same social circles.

In addition, young males and females diverge on their online habits, that is, the amount of time online, motivations and gratification from technology use, and adoption/usage patterns. These technology-based gender differences confirm the Social Role Theory (Eagly, 1987) and Rodgers' Diffusions of Innovations Theory (Rogers, 1983, 2003), and current research on human-centered technology adoption and media consumption habits based on gendered usability differences (Grellhesl & Punyanunt-Carter, 2012).

Technology-Based Responses to TDV

Internet penetration and smartphone ubiquity are at their highest peaks, even as digital health interventions have become *de rigueur* in daily life. On a global scale, more than 500 million people have a mobile health (mHealth) smartphone application (“app”) on the phones (see Dorsey et al., 2017), with famous examples such the MyFitness Pal, Nike+ Running™, Glucose Buddy™ as regular examples commonly used by participants. We are in the era of user-centered precision medicine and digital health culture. Every day, people are increasingly generating and regulating their health data in an interoperable digital ecology and relying on trusted devices (Apple Watch™, Fitbit™, Garmin Connect™, GoogleFit™) to initiate and sustain healthy behaviors (Dorsey et al., 2017; Kim, 2015; Klasnja & Pratt, 2012).

Similarly, about 7 in 10 US teens own smartphones with reliable internet access (9 in 10), making today's adolescents “digital natives” (“children born into and raised in the digital world” see Palfrey & Gasser 2008), much unlike their “digital immigrant” parents and adult mentors. Integrated place-based digital health interventions delivered to at-risk, low-income, and medically underserved communities can mitigate teen dating violence experiences and risk and expand services to overcome in-place barriers (Glass et al., 2010). With the proliferation of digital technologies (online, mobile, and social media platforms), we can now reach hard-to-reach youth, including youth who prefer technology-enabled interventions (as opposed to in-person services) and youth who prefer the privacy and confidentiality promised by technology-based intervention reached (Ranney et al., 2013; Zhou et al., 2019).

New technologies have become tools for socialization, albeit one that is now almost entirely digital (Prensky, 2001). Based on the frequency of use, adolescents are classified as light, moderate, or heavy (i.e., technophiles) media users. *Technophiles* (or heavy media users) watch about 16 hours of media a day (21 percent of all 8- to 18-year-olds) (Rideout, Foehr, & Roberts, 2010). *Moderate* users make up 63% (3–16 hours of daily use). *Light* users watch fewer than three hours of media a day. (17% of all 8- to 18-year-olds) (Rideout, Foehr, & Roberts, 2010). The highest consumption rates were reported with adolescents ages 11 to 14 years (Rideout, Foehr, & Roberts, 2010). In terms of consumption by race/ethnicity, Black/African American teen (average of 13 hours/day) and Hispanic teen (averaging 12:59 hours/day), compared to white adolescents (average of 8½ hours/day) – after adjusting for age, parent education, and family composition (single vs. two-parent households) (Rideout, Foehr, & Roberts, 2010). Of note, race/ethnicity is not a risk factor for TDV. However, other systemic and structural risk factors exacerbate TDV risk for racial and ethnic minorities.

Several studies report disparities in access to broadband internet, devices, disseminated digital content, and digital health platforms, particularly among unincorporated rural communities most in need. Some of the unincorporated communities are in internet ‘dead zones’ with little to no broadband access, thus limiting opportunities to expand digital health approaches among these populations. These include communities with income, education, race and ethnicity, immigration status, and other regional disparities. According to the U.S. Federal Communications Commission (FCC), there is a noted digital divide in the US. Over “39 percent of residents in rural areas, 41 percent in Tribal lands, and 66 percent in U.S. territories [lack] access to fixed broadband in 2014 compared with 10 percent of the U.S. population as a whole” (FCC Broadband Progress Report, 2016). Communities are forming cooperatives and are having to buy their own bandwidth and internet structure (e.g., internet towers). These infrastructures require significant investments to install, even as internet service providers worry about sustained payment by their rural clientele.

Given this precedence and the inconsistent effectiveness of anti-sexual violence programs (DeGue et al., 2014), gender-sensitive and age-responsive technology-based interventions must close these health equity gaps and be responsive to the adaptive needs of users. Efficient and cost-effective digital technologies have become innovative digital modalities to deliver victim services directly, safely, and confidentially to victims of partner violence, both on- and off-line (Glass 2017; Koziol-McLain et al., 2018). The Obama administration unveiled the 'Apps Against Harassment' campaign in 2011, headed by then-Vice President Joe Biden and the US Department of Health and Human Services, with the aim of using “the power of mobile technology to help deter dating violence and abuse” (HHS Press Office, 2011). Two apps won this competition: Circle of 6 (www.circleof6app.com) and OnWatch. These types of interventions meet several needs, from safety planning to consciousness-raising to referral to care, and may augment traditional face-to-face modalities for victims (and perpetrators) at various stages of help-seeking, empowerment, and rehabilitation. To meet the diverse socio-technical needs of victims and to increase acceptability, these technology-based interventions have become more culturally congruent based on extensive brainstorming and focus group input from indigenous survivors (Koziol-McLain et al., 2018), although rare among male users. Acceptability has also been demonstrated with male abusers and victims. For example, the *RealConsent* program is a web-based sexual violence (SV) prevention program combining online and individual intervention with adult men – showed demonstrable reductions in sexual violence and increases in prosocial bystander behaviors following a randomized controlled trial (Graham et al., 2019; Salazar, Vivolo-Kantor, & Schipani-McLaughlin, 2019). The app Consenting Adults provided a pre-sex platform for consenting (Bivens & Hasinoff, 2017), whereas the app Choose to Stop allowed active perpetrators to access their behaviors and signs of abuse (Bivens & Hasinoff, 2017). These types of apps signify early promise for technology-based interventions targeting male-focused perpetration and victimization.

According to the WHO Global Observatory for eHealth series (WHO, 2011), digital and digitally delivered health interventions comprise digital technologies directed at expediting the

delivery of specific health care services to meet specified health-related objectives (Anderson-Lewis 2018; Bernhardt 2013; Murray 2016; WHO 2019). Technology-based interventions include e-health (telemedicine, telehealth, telecare) and mobile health platforms (mobile health, mobile technologies, and wearable devices) and encompass broad infrastructure including healthcare IT and EHR, social media, and online social networks, useful to process user/patient data (e.g., medical imaging, health informatics, connected health, genomics, and personal genetic information). Technology-based interventions are mainly deployable via either eHealth (or electronic health) and mobile (or mHealth) platforms. eHealth platforms are defined as “information and communication technologies (ICT) for health” (WHO, 2011), whereas mHealth is defined as “medical and public health practice supported by mobile devices, such as mobile phones, patient monitoring devices, personal digital assistants (PDAs), and other wireless devices” (WHO, 2011). Both eHealth and mHealth modalities are used in the context of digital health, with mHealth described as a component of eHealth (WHO, 2011)

Technology plays a nuanced and vital role in the lives of adolescents. Most rural teens (ages 13 to 18) own smartphones (68%) or have access to the internet (91%); only 12% of adolescents age 13 to 17 have no cell phone (neither smartphone nor basic phone) (Lenhart et al., 2015). This ubiquity has transcended our expectations, particularly with historically marginalized groups who own cell phones but lack access to traditional health care. For example, more African American youth (85%) own phones compared to 71% of both white and Hispanic youth (Lenhart et al., 2015). Of the 84% (aged 8 to 18 years) of US youth with in-home internet access, 78% are African American youth, 75% among Hispanic youth (Lenhart et al., 2015). Overall, adolescents prefer tailored technology-based intervention to traditional formats for receiving interventions for risky behaviors (Ranney et al., 2013). The ubiquity and low cost of mHealth interventions may offer a viable complement to traditional modalities (e.g., counseling, family, and friends support, and justice involvement) for TDV prevention, risk assessment, psychoeducation (e.g., modules on abuse red flags, impulse, and emotional control), and referral to treatment.

Adolescents surpass any other age group in their internet use (Lenhart, 2015; Wartella et al., 2016). Contradictory reports exist on teen technology use, technology use habits, and socio-technical challenges linked to health-seeking behaviors on a variety of topics (physical fitness, sexuality, violence, nutrition, sexual health, and body image) (Wartella, Rideout, Montague, Beaudoin-Ryan, & Lauricella, 2016 citing Skinner, Biscope, Poland, & Goldberg, 2003). The most searched topics online were related to “personal fitness (42%) and dieting/nutrition (36%), stress/anxiety (19%), sexually transmitted diseases (18%), puberty (18%), sleep (16%), depression or other mental health issues (16%), hygiene (12%), colds/flu (12%), and drug or alcohol abuse” (12%) (Wartella, Rideout, Montague, Beaudoin-Ryan, & Lauricella, 2016). Evidence suggests that teens search mostly for sexual health information, and others find this is mostly common with same-sex adolescents compared to heterosexual teens (78%) (Mitchell et al., 2014). Further, there are differences by gender concerning willingness to use online sources to search for sensitive and emotionally charged health topics. Boys (ages 12–13) were the least likely to seek out information on sensitive health issues, whereas older adolescent females were more likely to search online for answers to sensitive topics (e.g., sexual health topics) (Lenhart, 2015). There were differences in socioeconomic status. Wartella and colleagues (2016), citing Peter and Valkenburg (2006), suggest that “Wealthier adolescents are more likely to use the Internet for information while poorer adolescents are more likely to use the Internet for entertainment” (p. 15). While most teens get their health information from parents (55%) and (29%) health providers, over 38% of those who go online for help do so a few times every year (Wartella, Rideout, Montague, Beaudoin-Ryan, & Lauricella, 2016).

Age (those older), race (African–American, Native American, and Hispanic teens), income (those wealthier), physical activity level (those more active), and general health (those healthier) are significant predictors for using the internet for health-seeking (Wartella et al., 2016). Girls are more likely to look up information on depression, body image, eating disorders, dieting/nutrition, and stress/anxiety (Wartella et al., 2016). Older studies report higher female internet use centered around topics of dating violence and sexual health topics (Borzekowski & Rickert, 2001). Teens from low-

income families were more concerned about problems such as ADHD, mental health, heart disease, and unintended pregnancy (Wartella et al., 2016). Of note, studies find no differences exist by age, gender, or family income on the likelihood to change a health behavior due to influence from a digital source (Wartella et al., 2016).

Overall, there are notable differences in teen online health information-seeking across various gender-sensitive and age-responsive demographic categories. Income and digital inequities are prominent influencers impacting health information-seeking, irrespective of access to smartphones and internet access. Given these barriers, technology-based interventions for teens must be strategically disseminated to reach those with limited access to essential services that support adolescent health and wellbeing while parents remain a significant source of information. However, current studies assume two-parent households. This may not always be the case, particularly where teens need answers to sensitive and intimate issues (e.g., dating violence), come from non-traditional homes, or contend with antagonistic parenting styles.

Technology-based interventions support behavioral self-management for several adolescent issues. A technology-based intervention will provide round-the-clock confidential educational modules, risk assessment, referral to care, and expert content on online anonymous chat groups and nationally syndicated websites (e.g., [Futureswithoutviolence.org](https://www.futureswithoutviolence.org) and [Breakthecycle.org](https://www.breakthecycle.org)). A growing number of interventions are delivered via web-based and mobile-based platforms to offer social, informational, and material support to victims (Koziol-McLain et al., 2018; Littleton et al., 2016). Several emerging interventions make a case for delivering these same interventions using app formats that are confidential, easily accessible, and interoperable with reputable sources of help (e.g., hotlines).

Gender-sensitive and age-responsive technology-based interventions are a critical resource in rural areas contending with the shortage of mental health service providers, slow first responder services, hospital closures, transportation issues (e.g., traveling long distances), lack of youth-specific services, and socio-technical challenges. By prioritizing confidentiality, user safety, offering

personalized real-time access to sensitive services (Glass et al., 2017), technology-based interventions mitigate access gaps in rural areas. They also lessen health disparities caused by socioeconomic disadvantage and sociocultural factors like victim stigma, racial discrimination, provider distrust, all of which can severely impede the utilization of care even where care is accessible and available (Slater, Campbell, Stinson, Burley, & Briggs, 2017).

Though welcome, emerging mHealth interventions and technology-based solutions are currently designed to assume homogeneity in social settings, youth advantage, level of risk, and ethnoracial vulnerability (linked to socioeconomic disadvantage) (Jewkes & Dartnall, 2019; Lauckner et al., 2019; Miller-Perrin et al., 2017). Etiologic dating violence research must build on current evidence by clarifying relationship-level and community-level risk and protective factors for TDV to identify potential socio-technical challenges and opportunities for early prevention based on unique social ecologies. Further, a clear understanding of the barriers and facilitators of behavior change technology-based interventions may help guide future intervention development. In terms of couple relationships, a systematic review found that mobile phone initiatives strengthened women's decision-making, social status, economic empowerment, and health-seeking while also increasing men's involvement in sexual and reproductive health (Jennings & Gagliardi, 2013).

However, it is not unlikely that the same mobile phone interventions may widen the digital divide between men and women and perpetuate existing gender-based power imbalances among abusive partners (Jennings & Gagliardi, 2013; Jewkes & Dartnall, 2019). In fact, evidence shows online dating apps can be a risk factor for sexual violence, especially with high use among sexual and gender minorities on sex-seeking apps (Choi, Wong, & Fong, 2017; Lauckner et al., 2019; Scannell, 2019). Studies indicate dating apps increase vulnerability and the odds of sexual violence by two times (adjusted odds ratio of 2.13, $p < .05$) (Choi, Wong, & Fong, 2017), as well as sexually transmitted infections (Beymer et al., 2014). Several forms of technology-enabled abuse, including “catfishing” (using deceptive online personalities and profiles), cyberbullying, sexual coercion, grooming, online harassment, human/sex trafficking, and financial exploitation, are noted in the

literature (Lauckner et al., 2019). Technology-enabled abusers use obsessive monitoring (i.e., control aggression), remote stalking, cyberbullying, trolling (as a form of breakup violence), and partner tagging using device cameras, location trackers, spyware, GPS, geosocial mapping, and social media signatures on victim devices (Freed et al., 2017). Several studies also find user concerns with the security and privacy of technology-based interventions (Zhou et al., 2019). There are also several noted ethical issues, safety concerns, privacy, ethics, data use challenges with using technology-based interventions for personal and intimate issues (Zhou et al., 2019).

In a review of 215 anti-rape apps, Bivens and Hasinoff (2017) identify the tendency for anti-rape apps to be tone-deaf, placing the onus of risk reduction on females. These apps may perpetuate the occurrence of sexual violence as one-off events and propagate rape myths, such as sexual violence by a sleazy stranger (i.e., the stranger-danger myth) when abuse is most likely by known acquaintances in familiar locations (Bivens & Hasinoff, 2017). Erroneously, some TDV interventions utilize gender-neutral approaches that perpetuate rape myths placing the onus of risk reduction on the victims – a tactic of social control and victim-blaming – that may reflect the techno-cultural perceptions of app designers, who are mostly male (76% of computer scientists are male) (De Koker, Mathews, Zuch, Bastien, & Mason-Jones, 2014; Bivens & Hasinoff, 2017). However, Bivens and Hasinoff (2017) overlook the practicality of location-monitoring features and the startling prevalence of stranger rape and sexual assault in LMIC places – most commonly in Southeast Asia (the 2012 Delhi gang rape comes to mind). In addition, Bivens and Hasinoff (2017) propose socio-technical constraints that can impede the functionality and practicality of sexual violence apps. These socio-technical issues include repressive funder guidelines, financial/time constraints, diversity of technological devices, app store policies, and the discernment of the app designers (Bivens & Hasinoff, 2017).

Other critical gaps persist. For one, there is emerging evidence of the successful use of gender-sensitive and age-responsive technology-based interventions for behavioral and mental health in low-income rural contexts involving adolescents and young adults (Jewkes & Dartnall, 2019).

What dating violence research there is suggests the need for rigorous randomized trials comparing various technology-based interventions among different user groups. TDV technology-based program implementers may commonly evaluate digital apps for their ability to modify attitudes, objective knowledge, stereotypes, and belief towards realigning evolving TDV pathways on time, before the onset of TDV, and in keeping with the ever-changing technology and social media landscape.

Typically, adolescents favor online health behavior interventions fearing judgment and chastisement from parents and formal providers. Current TDV interventions are focus on adult female users (samples of $\geq 80\%$ female) sustaining the male perpetrator/female victim narrative, commonly considered in adult dating violence literature (Debnam & Kumodzi, 2019). Victim-centric prevention places the onus of risk-reduction on females and presenting partner violence as an inevitable occurrence in daily life (Bivens & Hasinoff, 2017), or oversample cisgender heterosexual female-only survivors (Newton et al., 2019), even as teen males are just as likely to be victims of specific forms of dating abuse. Adolescent males avoid talking on 'hotlines' with parents and rarely with peers. Those seeking answers online to intimacy, identity, mental health, and dating issues report misleading, incorrect, or outdated information (Debnam & Kumodzi, 2019). Mobile health (or mhealth) interventions are provider-mediating, confidential, and delivered via web or smartphone platforms. In applied situations, digital technologies use open-source mapping, geosocial-networking, gamification, geofencing, GPS pin tracking, and crowdsourcing tools to respond to sexual violence (e.g., SafeCity, Hollaback! Harass Map, redeye, Háblame *de* Respeto), and for mapping, sexual violence hotspots, documenting/disclosing abuse, and anonymously contacting law enforcement, (Jewkes & Dartnall, 2019; Rentschler, 2014).

Evidence-based technology-based interventions offer a sensible bargain to co-manage cross-cutting issues (i.e., TDV, substance/alcohol abuse, PTSD, depression) (Glass et al., 2017). Moreover, they can amplify rural services, offer safe and real-time access to services (such as safety planning, cognitive-behavioral skills, brief psychoeducational, and tele-mental support) via educational

modules, risk management, and referral to trusted resources. A technology-based intervention can provide round-the-clock confidential educational modules, risk assessment, referral to care, and expert content. Technology-based interventions offer a combination of crisis intervention, safety planning, psychoeducation, in the form of evidence-based Screening, Brief Intervention, and referral to treatment (SBIRT) to expand access to support services (medical, mental health, legal, and psychosocial support) for teen victims, teen abusers, and their families. Still, evidence on their efficacy is evolving. No prior study describes this type of prevention activities using digital interventions with rural AYA males at-risk for TDV, making it hard to ascertain the benefits and socio-technical challenges with using technology-based interventions with this cohort.

The issues described above have left important questions unanswered. How do contextual factors affect the acceptability and feasibility of mHealth interventions? What strategies exist to increase adoption, promotion, and implementation of evidence-based technology-based interventions despite its promise for being confidential, safe and reliable for real-time access to medical, mental health, legal, and psychosocial resources (e.g., local support services for rape and domestic violence)? Rigorously evaluated TDV mHealth interventions are still in the emergent phase (i.e., feasibility trials) or experimental phase (Emezue & Bloom, 2020).

TDV Among Rural Adolescents

Compared to urban AYA, rural youth report twice the prevalence rate of physical dating violence (Martz, Jameson, & Page, 2016; Marquart et al., 2007; Spencer & Bryant, 2000; Vézina & Hébert, 2007). Some regional discrepancies exacerbate rural TDV. Marquart et al. (2007) report a regional breakdown of TDV prevalence in the United States as follows: South (43.8%), followed by the West (27.5%), the Midwest (25.7%), and the East (22.8%). In contrast, other studies show higher prevalence rates with urban samples (Hickman et al., 2004) or among racial minorities in urban settings (Fedina et al., 2016). Contrasting studies report rural youth to have nearly twice the physical violence rates of urban and suburban teens (Foshee, McNaughton Reyes, & Ennett, 2010; Hedge et al., 2017; Martz, Jameson, & Page, 2016; McDonnell et al., 2010; Spencer & Bryant, 2000). Evidence

shows that violence-exposed rural youth (particularly those in small rural areas) contend with persistent rural poverty (Edwards et al., 2014; Lanier & Maume, 2009; Martz, Jameson, & Page, 2016), youth disengagement, fragmented support services, high social cohesion (threatening confidentiality of services), and psychosocial risk factors (e.g., traditional masculinity, violence-tolerant attitudes toward women, and a low bar for abuser accountability) – all of which undermine current interventions (Lichtenstein & Johnson, 2009; Office of Juvenile, & Delinquency, 2003). Overall, the Youth Risk Behavior Survey (YRSB) shows considerable variation in TDV rates by states, from a low of 6.5% in Vermont to a high of 16.1% in Georgia (median of 11%) (CDC, 2012, p. 67). The 2017 Missouri High School Youth Risk Behavior Surveillance Survey showed that 10.3% of Missouri youth (13.3% females) reported being forced to have sex, highest among Hispanic youth at 16.2% compared to all other ethnoracial subgroups (Kann et al., 2018).

A Matrix of Issues

The literature on family stress theories suggest that rural adolescents remain chronically exposed to a matrix of issues, including adverse childhood experience (ACE, i.e., child abuse and neglect), parental violence exposure, youth violence, and youth/parent suicide (St. Mars & Valdez, 2007; Vezina & Hebert, 2007). Rurality is further compounded by having a male perpetrator in the home, substance use, parental death/divorce, juvenile justice involvement, and violence-accepting attitudes (McCauley, Breslau, Saito, & Miller, 2015; McDonnell et al., 2010). For rural YOUTH, chronic family violence, physician shortages, concentrated poverty, racism/discrimination, non-confidential services, psychosocial barriers (e.g., restrictive social norms) exacerbate TDV risk and impact their ability to seek out and use confidential services (Lichtenstein & Johnson, 2009; Martz, Jameson, & Page, 2016; Marquart et al., 2007; Osgood, Chambers, United, Office of Juvenile, & Delinquency, 2003; Vézina & Hébert, 2007). Other discriminations may exacerbate TDV risk. For example, with rural youth victims who have sex with men, homophobia and homophobic violence are common forms of abuse in rural communities habituated to social scrutiny and heterosexual culture (Lauckner et al., 2019).

Since the Great Depression in the 1930s, rurality has been discursively associated with a “culture of poverty” and the “racialization of poverty” (Flora, 2019; Tickamyer, Sherman, & Warlick, 2017), particularly in the Southern US (Marquart et al., 2007). While this discourse is problematic in several ways, it remains a consistent backdrop of rural America (Tickamyer, Sherman, & Warlick, 2017). Over 40 million Americans contend with food insecurity, inaccessible health care, and persistent residential instabilities (Housing Assistance Council [HAC], 2012).

Rural poverty research and anti-poverty interventions often defer to high levels of vulnerability brought on by prevalent racism, persistent poverty, and social isolation in rural communities (Bernard, Contzen, Decker, & Shucksmith, 2019; Tickamyer, Sherman, & Warlick, 2017). Nearly 40% of teenagers aged 12 to 17 in the United States come from low-income families (Jiang, Ekono, & Skinner, 2016). Overall, the number of teenagers in low-income households in the United States has gradually risen from 35% in 2008 to 40% (in 2014) (Jiang, Ekono, & Skinner, 2016, p. 2) - mainly from African American homes (60%). In this context of rural poverty, individual and family stressors are inevitable, leading to situations conducive for family conflict and violence – per the family conflict theory (Straus, 2009).

Resiliency Models and family resilience researchers emphasize family-level protective factors (e.g., flexibility and adaptability) and recovery factors (cohesion, commitment, spirituality, communication, hardiness) as counterpoints to family stress (McCubbin et al., 1997). According to Masten (2018), “resilience is defined as the capacity of a system to adapt successfully to significant challenges that threaten its function, viability, or development. However, we do not fully know what protective factors lead to resiliency among rural youth who have experienced TDV. Dating violence research will benefit from a greater understanding of protective factors. Research that characterizes the social and structural conditions which facilitate TDV resilience is particularly encouraged. Filling these research gaps is fundamental to the development of effective community-based and individual-level interventions to prevent dating violence and to improve youth relationship outcomes. We also

do not know how to respond to TDV in high-risk rural areas with health provider shortages. Hence the critical need for interventions specific to TDV among rural youth.

TDV Among Rural Minority Males

Race and ethnicity remain substantial determinants of TDV incidence and prevalence, although this relationship is not causal (e.g., unclear trajectories of dating violence perpetration), leaving a mixed picture in the literature of TDV linked to race/ethnicity (Orpinas et al., 2013; Sianko, Kunkel, Thompson, Small, & McDonell, 2019). However, several studies report a higher TDV prevalence among African American and Hispanic youth (Sianko, Kunkel, Thompson, Small, & McDonell, 2019).

Over 12.2% of Black/African American teens and 11.4% of Hispanic teens experience TDV compared to white teens (7.6%) (CDC, 2012; Foshee, McNaughton Reyes, & Ennett, 2010; Makin-Byrd & Bierman, 2013). The Youth Risk Behavior Surveillance System (YRBSS) consistently indicates peak prevalence among Black/African American females and males (X%) compared to Hispanic (11%) and non-Hispanic white (8%) females and males (Eaton et al., 2012). National studies indicate the highest per capita rates of TDV among African American adolescent boys (12.4%) and girls (11.8%) (Black et al., 2014; Foshee, McNaughton Reyes, & Ennett, 2010). After African American youth, the next most impacted are Native American/Alaska Native youth, followed by Hispanic adolescents, white youth, and Asian youth (Eaton & Stephens, 2018).

During adolescence, Black and African American youth (including African and Caribbean youth) start to form and place value on their racial identity. This racial socialization process is informed by social connotations and portrayals of race/ethnicity in their environment - in line with Erikson's theory of interpersonal identity (Erikson, 1968). This racial socialization process is chaperoned by central influences in their lives, including media depictions of race/ethnicity, essential family members, and community socialization to racism and other discriminations. Research using the Minority Stress Model (Meyer, 2003, 2013) as a theoretical and explanatory framework suggests that a persistent state of hypervigilant racial awareness, actual discrimination, internalized racism, and

anticipated injustice enough to trigger numerous physiological and psychological signals, leading to reduced cognitive and emotional functioning, behavioral problems, and conduct problems among boys and young men of color (Sawyer, Major, Casad, Townsend, & Mendes, 2012).

At the community level, discrimination and oppression—compounding trauma— may affect minority youth victims of violence. These are crucial considerations in understanding the qualitative experiences of interpersonal violence, trauma, and Black youth culture. More so because TDV prevalence rates vary significantly by race and ethnicity. Boys and young men of color are demonstrably at high risk for dating violence, among other co-occurring ills. However, this risk is not merely linear. A longitudinal study on dating aggression by Connolly et al. (2010) suggests that an accumulation of specific risk factors modified minority status (e.g., anger and hostility) enough to predict their risk for dating aggression and victimization (also see Foshee et al., 2010).

All considered, TDV research has centered on non-representative white samples in both low- or high-risk urban areas; even though boys and young men of color remain disproportionately impacted by TDV – either as victims or perps (Foshee, McNaughton Reyes, & Ennett, 2010; Sianko et al., 2019). These participant-biased studies reflect an amalgamation of inherent, implicit biases, institutionalized discriminations, and researcher incapacity to connect meaningfully with adolescents in communities outside their own. It is not unlikely that minority participants in TDV research are understudied due to parochial research goals, funding priorities, politics informing research, and sampling expediency (Jewkes, Flood, & Lang, 2015; Sianko et al., 2019), and a lack of representative minority researchers able to gain entrée into minority communities (Exner-Cortens et al., 2016). Furthermore, the notion of “healthiness,” however, is highly idiosyncratic. It is not untenable for dating violence researchers to adjudicate relationship *healthiness* based on their frame of reference, even as variations exist in cultural understandings of what constitutes the fitness of romantic relationships.

Given noted discrepancies, some culturally specific studies have focused on distinct groups of boys and young men of color. These include Latino youth cohorts (Cuevas, Sabina, & Bell, 2014;

East & Hokoda, 2015), Black/African American youth (Black et al., 2014; Henry & Zeytinoglu, 2012), and immigrant youth (Black et al., 2013; Gonzalez-Guarda et al., 2014). Other excluded groups include boys and young Men of Color who are out-of-school (i.e., graduated or dropped out), in foster/juvenile care, and those in unstably housed/homeless contexts (i.e., “street youth”) (Sianko, Kunkel, Thompson, Small, & McDonell, 2019). Given these issues, it has become imperative to recruit boys and young men of color into participatory interventions that match their unmet needs and address noted disparities.

While Black/African American youth exposure to community and school violence is historically high (Cooley-Quille et al. 2001; Foshee, McNaughton Reyes, & Ennett, 2010; Gaylord-Harden, Cunningham, & Zelencik, 2011), it comes as no surprise that boys and young men of color from economically-disadvantaged locales may become desensitized to violence and so experience adverse mental health outcomes (i.e., internalizing behaviors, physiological arousal, numbing, anxiety and depressive symptoms, see Gaylord-Harden, Cunningham, & Zelencik, 2011).

These outcomes are highly gendered among minority youth. Evidence suggests that psychological outcomes of community violence are worse in African American females than in males, even though males (50%-96%) report higher exposure to community violence (Boyd et al., 2003; Chen, 2009; Gaylord-Harden, Cunningham, & Zelencik, 2011; Gorman-Smith et al., 2004; Singer et al., 1995). Controlling for socioeconomic status, African-American and Hispanic students still experience high exposure to community violence (e.g., shootings and stabbings) compared to their non-Hispanic white peers - even if they attended the same school (Gaylord-Harden, Cunningham, & Zelencik, 2011; Schwab-Stone et al. 1995), suggesting differential exposures to pockets of neighborhood violence in violence *hotspots* outside schools.

Desensitization hypotheses indicate that with a high occurrence of violence, growing acceptance of violence is the *norm*. This may explain why boys and young men of color are at high risk for future perpetration and victimization experiences, having not known any different (Reed et al., 2011). Following victimization, African American females also used normalizing language to

discuss and define forced or coercive sex (Black et al., 2014; Decker, Raj, & Silverman, 2007), linked to violence acceptance and future violence (Reyes et al. 2016). Parenting practices around TDV responses also differ by gender. Compared to sons, African American daughters received more protection (or supervision) from parents on topics of violence in general, as well as on racially motivated violence and other discriminations (Sawyer, Major, Casad, Townsend, & Mendes, 2012). The same focus on females is construed in gendered messaging as seen in narratives from parents of their responses to dating violence with their teenagers (Black, Weisz, Preble, Sharma, 2015).

In the absence of healthy and non-violent ways to express feelings, maladaptive coping strategies are formed (McCauley et al., 2015). Despite the paradoxical surplus of dating violence interventions, minority rural youth remain outliers in rural violence and rural poverty research. Moreover, the cultural and contextual factors that facilitate or protect them from TDV remain elusive in the literature, making it problematic to recognize the intersectional influences of race and ethnicity on TDV (Crenshaw, 1993) - beyond the multiplicative effects of rurality and socioeconomics.

Help-seeking Intentions and Behaviors

Help-seeking involves a pattern of dynamic behaviors to solicit guidance, information, and positive support in response to a crisis or to satisfy coping requirements (Hedge, Sianko, & McDonell, 2017). Only about 1 in 3 adolescents in a violent relationship report their abuse, and 86% prefer to tell a friend rather than an adult, including parents (Hedge, Sianko, & McDonell, 2017). In a study of low-income rural teens, 60% of victims and 79% of offenders did not seek formal or informal support for dating abuse (Ashley & Foshee, 2005). Several contextual and dispositional factors influence adolescent formal and informal help-seeking behaviors (Spencer & Bryant, 2000). In general, adolescents avoided using formalized professional medical, mental health, legal, and psychosocial support (e.g., delivered by service providers, law enforcement, and civil protection orders) (Ocampo, Shelley, & Jaycox, 2007). Studies consistently indicate adolescents prefer to elicit support from a friend, sibling, or trusted peers who could relate to their situation or co-ruminate with

them to “extensively discuss, rehash, and speculate about problems” (Banyard et al., 2010; Black et al., 2008a; Ehrenreich & Underwood, 2016; Fry et al., 2014; Spencer & Bryant, 2000; Waller & Rose, 2013). Youth associates high “psychological costs” to seeking formal help from a coercive parent (or an unhelpful adult). These psychological costs include shots to their self-esteem, self-image, anonymity, and independence, further exacerbating TDV risk (Black & Preble, 2016; Spencer & Bryant, 2000).

Help-Seeking by Gender & Age

Hedge, Hudson-Flege, & McDonell (2017) found in their longitudinal sample of ethnically diverse adolescents ($n = 518$) in a small, southern US county that gender was a clear predictor of help-seeking behaviors. A frequently cited disadvantage of existing interventions is that teenagers rarely seek professional help for TDV issues (Fry et al., 2013). Furthermore, youth females are more likely to seek informal support (i.e., family and friends), citing trust issues, fear of being blamed, stigma, and confidentiality with professional help (Fry et al., 2013; Hedge, Sianko, & McDonell, 2016). Hedge, Sianko, and McDonell (2016) discovered that informal help-seeking mediated the connection between perceived social support and professional help-seeking intentions in a study of 89 adolescents from a rural, southern county. According to these researchers, rural teens (mostly females) were more likely to seek informal assistance for physical violence than for psychological violence, although professional assistance for physical and sexual abuse was more likely (Hedge, Sianko, & McDonell, 2016). In a study by Foshee et al. (2005), victims who sought help for dating violence were primarily females (78.9% vs. 21.1% males), whereas the number of perpetrators who sought help for dating violence was not much different females and males (58.6% vs. 41.4%) (p., 28).

According to gender socialization studies in families, evidence suggests rural males are more likely to endure “private conflicts” without seeking help in the form of medical, mental health, legal, and psychosocial support (Pappas, 2019). This androgenic *defiance* impacts other health-seeking behaviors (Yousaf, Popat, & Hunter, 2015; Springer & Mouzon, 2011). Other studies indicate, irrespective of age, young males are less inclined to talk about their abuse, even with male peers

(Black et al., 2008; Fallon & Bowles, 1999; Fry et al., 2014; Hébert, Moreau, Blais, Lavoie, & Guerrier, 2017; Pappas, 2019; Zastrow and Kirst-Ashman, 2007). Unsurprisingly, dating violence research shows that girls leverage high-quality and close friendships as buffers for emotional issues (Giordano et al., 2006; Rose, 2002, p. 1830). Relationship-history narratives show that unlike females (who develop close friendships early with experiences of failed and restored relationships), males commonly demonstrate an incapacity to form close bonds (especially in later life) and so have challenges communicating emotions and navigating romantic feelings (Giordano et al., 2006, 2010).

Studies looking at help-giving behaviors indicate male peers are significantly less likely to offer either emotional or instrumental support to fellow males experiencing TDV, more so among ethnic minority males (Fry et al., 2013). Beyond emotional support (i.e., words of advice, positive affirmations, validation of experiences), adolescent help-givers commonly offered instrumental support, such as referring teen victims to formal helpers (e.g., police or shelter services), providing financial assistance or temporary shelter (e.g., a place to sleep), or actively helping the victim leave the abusive relationship through safety planning, if possible (Fry et al., 2013).

The study by Hedge, Sianko and McDonell (2016) used grade level as a proxy for age and discovered that 9th graders were more likely than 11th graders to seek treatment for dating abuse. Other studies, on the other hand, show an increase in help-seeking by age (Ashley & Foshee, 2005). Although teenagers are more likely to seek TDV assistance from peers, in extreme cases of physical and sexual abuse, they are more likely to violate help-seeking norms when they seek medical, mental health, legal, and psychosocial support from adults/professionals (Fry et al., 2013).

Help-Seeking by Race/Ethnicity

While some studies find no difference in help-seeking by race/ethnicity (Ashley & Foshee, 2005; Hedge, Sianko, & McDonell, 2016), others have found variations in ethnic minorities' post-trauma help-seeking behavior and coping during trauma (Eaton & Stephens, 2018). Studies show that non-Hispanic samples seek support (and disclose abuse) more than their Hispanic counterparts (Fry et al., 2013). Even though there are contradictory studies on the effect of age on TDV help-seeking

attitudes, African-American and Hispanic teenagers (when compared to non-Hispanic teens) are more likely to seek parental and family support rather than professional help (Hedge, Sianko, et al., 2017; Spencer & Bryant, 2000). With African American males, a combination of discrimination, systemic racism, and gender-based stigma may further hinder help-seeking (Grande & Sherman, 2018). Therefore, it is a priority to engage men and boys by way of primary prevention using positive schemas of masculinity and a focus on universal education and social norms campaigns to advocate for mutual respect, non-violence, and positive bystander behaviors (Campbell, Neil, Jaffe, & Kelly, 2010; Crooks et al., 2007; Katz, 1995; Kaufman, 2001; Wells et al., 2013). These prevention efforts can aim for evidence-building to inform policies mitigating the full provision and utilization of dating violence services in rural areas.

Help-Seeking Among Rural African American Male Adolescents

Help-seeking intentions and behaviors among rural adolescents is an understudied domain (Hedge, Sianko, et al., 2017). This is because dating violence is highly contextualized with this age group. For example, certain forms of violence are considered more severe than others in youth narratives (Murray & Azzinaro, 2019). Evidence shows rural youth are more likely to seek medical, mental health, legal, and psychosocial support for physical and sexual violence, but not for the more prevalent psychological abuse; more so with females than with males (Hedge, Sianko, et al., 2017). Even with economic prosperities, US African Americans residing in rural communities continue to endure profound and anachronistic poverty, particularly in the southern United States (Murry, Heflinger, Suiter, & Brody, 2011).

Further, specific to Black and African American men is the notion of *John Henryism* – an old concept describing male stoicism in the face of hardship, brutality, psychosocial, and racial stressors (James, Hartnett, & Kalsbeek, 1983). John Henryism is linked to adverse mental health outcomes (e.g., depression and hypertension) in African American adult males (Hudson, Neighbors, Geronimus, & Jackson, 2016; Pappas, 2019). This male-centered assumption derives from ideals of cultural expectations for male conduct in AA communities; disclosing abuse is, therefore, an

aberration of masculinity. The interplay of culture, rurality, discrimination, and Black masculinity may exacerbate TDV. While these concepts have never been used in dating violence research to describe coping tactics, *John Henryism* may manifest as an overt disparagement of *weakness* and vulnerability in Men of Color (i.e., constraining definitions of masculinity), presenting any show of victimization as usual and irrational and fostering an ethos of “Playing it cool,” in the face of relational violence (Majors & Billson, 1992, p. 27). Therefore, per the theory of Precarious Masculinity (Vandello, Bosson, Cohen, Burnaford, & Weaver, 2008), maleness is performative and forms of masculinity earned. Males are required to prove and validate their manhood socially. Thus, male victims of Color (especially gender and sexual minorities) are discouraged from seeking material (medical, mental health, financial, sexual health, legal support) and psychosocial support, thus encouraging the use of overt violence as a crutch for masculinity (Harris, Torres, & Allender, 1994).

Similar concepts in Hispanic cultures are *Caballerismo* and *Machismo* – a prime illustration of a culture-influenced hegemonic model of masculinity common across Hispanic/Latino cultures. *Machismo* has been used to justify partner violence counterbalanced by *marianismo* (instituted in Catholicism) or female submissiveness, self-sacrifice, and forbearance in the face of partner violence (Eaton & Stephens, 2018; Hancock & Sui, 2009). *Machismo* (and *caballerismo*, often with positive connotations such as chivalry and family pride) have been described by male abusers to serve both positive and negative purposes in romantic relationships (Arciniega et al., 2008; Haglund et al., 2018; Marrs Fuchsel, Murphy, & Dufresne, 2012; Parra-Cardona et al., 2013). Rural youth males may still live by trado-masculine and cultural scripts punishing of openly displayed feelings, sensitivity, and comfort-seeking in warm friendship, making them less likely to retain friendship or make new ones with severe impacts on their physical and mental health. Naturally, there are apparent, within-group differences (influenced by individual, contextual, and situational factors). For example, some studies report higher TDV acceptance and tolerance with Latino males (Ulloa et al., 2008). Thus, caution is advised against describing minority men with any explicit stereotypical formula not substantiated by empirical evidence and an in-depth social autopsy.

In a study with adolescents from the rural south, family functioning, parental problem-solving (i.e., related to correctly identifying and resolving abuse), active or inactive dating status, productive co-rumination with trusted adults, and violence-tolerant norms were significant predictors for adolescent help-seeking intentions (Hedge, Hudson-Flege, & McDonell, 2017; Kôlves, Milner, McKay, & De Leo, 2012). Studies show that in rural African American communities, family, church (and religiosity), and schools constitute familiar sources of positive psychosocial support (Murry, Heflinger, Suiter, & Brody, 2011). African American parents socialized their children to better cope with discrimination, anticipated to be higher with male children in school and community life contexts (Berkel et al., 2008). Where parents proactively socialized their children to the ills of systemic and overt discrimination and racism, in the same way, they prepared them to identify and respond to TDV (Berkel et al., 2008).

Help-Seeking: Peers as First Responders

More than males, females are more likely to seek help from peers in their social network for interpersonal and socioemotional issues (Black, Tolman, Callahan, Saunders, & Weisz, 2008). This type of informal help-seeking increases progressively with age (Fallon & Bowles, 1999; Ocampo, Shelley, & Jaycox, 2007). This reliance on peers re-echoes the Convoy Social Support Model (Kahn & Antonucci, 1980). However, peers may be ill-equipped to help, unwilling to endorse or even report abusive behaviors, and may misread the signs of TDV (Hedge, Sianko, & McDonell, 2016; Pittman, Wolfe, & Wekerle, 2000). Still, peers form a vital part of adolescent “social convoys” – representing “a network of relations that moves with the person through life, changing in structure but providing continuity in the exchange of support” (Levitt, 2005; Levitt, Weber, & Guacci, 1993; Oudekerk et al., 2014). Levitt (2005) suggests that the quality of the adolescents’ social relationships bears implications for how they seek and use support from their social convoy for age-related issues – e.g., sibling conflict, first romantic relationships, individual accomplishments/failures, and parental involvement in these events. On a digital end of things, Bivens and Hasinoff (2017) identified several bystander-specific apps that actively or proactively empower bystanders to intervene when faced with

abusive situations. Some of the apps include R.I.S.E., the Green Dot app, A Call for Help, Grace's Diary, Safe Community, and NetProtect (Bivens & Hasinoff, 2017).

Help-Seeking: Parents as Second Responders

While peer versus parental influences can be competing in the context of help-giving (Levitt, 2005; Levitt, Weber, & Guacci, 1993; Oudekerk et al., 2014), avenues for positive parental intervention in TDV are unexplored mainly because TDV is hard to detect, forms of abuse (i.e., rape and sexual assault) are harder to disclose, and teens are more likely to consider parental support when peer support is ineffective. Besides, parents may lack the requisite emotional, cognitive, and pragmatic skills to intervene when it comes to highly sensitive and intimate adolescent health behavior issues (Black et al., 2008a; Hedge, Sianko, et al., 2017). Only about 50% of parents talk about dating abuse, unlike other teen-related topics, drugs (91%), alcohol (82%), and sex (75%) (Rothman et al., 2011). In addition, requisite parental skills such as emotional support (warmth, empathy, and encouragement), informational support, and instrumental support (medical, mental health, legal, and psychosocial support) may be challenging to use without effective parent-child communication (Ashley & Foshee, 2005).

Teenagers experiencing relational dating violence, in addition to family violence, are at an increased risk for juvenile delinquency, developmental issues, and antisocial outcomes (Shortt et al., 2019). Positive and warm parenting behaviors may mediate this risk (David-Ferdon & Simon, 2014; Shortt et al., 2019). Only a handful of studies have explored TDV in the rural context with or without parental involvement (Hedge, Sianko, et al., 2017; McDonnell et al., 2010; Olimb, Brownlee, & Tranter, 2002; Osgood & Chambers, 2003; Spencer & Bryant, 2000; Wright, 2016) making rural TDV a significant area for inquiry knowing what we know about TDV prevalence, characteristics, and impact. Adolescents in need of medical, mental health and psychosocial, and relationship support seldom involved their parents if they considered them to be “technologically challenged” (Baker & Carreño, 2016). It is also likely parents failed to fully understand the impact of technology

on dating violence, making teachable parental involvement in the prevention of TDV a priority (Baker & Carreño, 2016).

Help-Seeking Online

In addition to seeking support from peers, adolescents also seek help/health information online for issues like intimacy, sexuality, feminism, identity, and behavioral health screening and interventions (Ranney et al., 2013). While highly valuable, online sources (e.g., social networking sites) can be misleading, outdated, and potentially harmful (e.g., pornographic sites) (Brown & L'Engle, 2009; Peter & Valkenburg, 2010). Incorrect information can reinforce injunctive norms related to gender expectations and sexuality, leading to negative internalizing and externalizing behaviors (e.g., withdrawal, loneliness and anxiety, aggression, and hyperactivity) in the face of public and social scrutiny among peers (Ehrenreich & Underwood, 2016; Wartella, Rideout, Montague, Beaudoin-Ryan, & Lauricella, 2016). Furthermore, youth report encountering nuanced vocabulary to explain health habits, trouble locating the information they need, and time-consuming layers of didactic data online, complicating this type of help-seeking.

There are gender differences with help-seeking habits online. Adolescent females are socialized towards communications, empathy, and comfort-oriented social schemas (Harold, Colarossi, & Mercier, 2007), making them likely to co-ruminate as a coping strategy - that is, “extensively discuss, rehash, and speculate about problems” (Waller & Rose, 2013) on social media. Barring any evidence-based data and meaningful filtering of online information for credibility, social media co-rumination can further expose teenagers to harmful content in the form of castigatory (“trolling”) comments from peers. This is more likely to affect females than male youth, as males are less prone to this type of co-rumination and dyadic coping with peers - not even as a buffer mechanism (Fry et al., 2014; Waller & Rose, 2013).

In response, researchers are developing and testing pilot technology-based interventions to provide a closed-system interactive environment where social and health problems can be attended to confidentially with expert advice (i.e., evidence-based) tailored to the user’s unique environment

(Debnam & Kumodzi, 2019; Glass et al., 2017). It is likely that digitalized interventions may increase help-seeking and play empowering roles as a personalized safety planning intervention (Debnam & Kumodzi, 2019), especially for sexual and gender minorities (SGM) in rural areas accustomed to a heterosexual culture that can be discriminatory to SGM youth (Lauckner et al., 2019; McKenney et al., 2018).

However, “technological gender gaps” exist in technology acceptance (Grellhesl & Punyanunt-Carter, 2012). For example, females are considered late adopters of new technology; but are inclined to socially oriented and sustained communication with their peers when adopting responsive technology (Grellhesl & Punyanunt-Carter, 2012). Conversely, young males, predominantly sexual minority males (men who have sex with men; MSM), are considered *early adopters* (Grellhesl & Punyanunt-Carter, 2012; Lauckner et al., 2019). Males favor task- and goal-oriented routines (Grellhesl & Punyanunt-Carter, 2012). How these differences can be leveraged in intervention design is critical information missing in the current literature.

Focus on Rural Communities

Youth in rural areas contend with a plethora of social determinants of health. In dating violence prevention, several higher-order issues also influence experiences of TDV, but more importantly, how local and state policies respond to TDV. Robust policies have been strongly linked with TDV reduction (Hoefler, Black, & Ricard, 2015). For example, a state like California with an ‘A’ grade allows minors’ (>12 years) access to sensitive and intimate services and obligates schools receiving state funding to provide age-appropriate TDV instruction for students and training for school staff and administrators to promote non-violent conflict resolution, assertive communication, and mediation techniques.

Evidently, in the absence of preemptive prevention activities, it is likely the average youth is unaware of their risk of TDV, the red flags and precipitating events of abuse, what constitutes a healthy relationship, and what community resources they can turn to for medical, mental health, legal, and psychosocial support. At the individual level, personal attitudes, beliefs, and behaviors that

condone the use of violence can be used to demonstrate and validate power and control in relationships (Vivolo-Kantor et al., 2019), confirming the Theory of Gender and Power (see Wingood and DiClemente, 2000). These individual attributes are intricately linked to ecological factors, such as gender, age, socioeconomic status, disabilities, peer environment, rurality, racism, family history, adverse childhood experiences (ACE), and community violence.

For example, Missouri, where the PI's university is located, is one of nine states that scored a consistent 'F' grade on the quality of the state's policies regarding legal protections for TDV victims (Break the Cycle, 2010, 2012). Besides, while teen victims in 45 US states, including the District of Columbia, can obtain civil protection orders (CPO; a type of restraining order), Missouri is the only US state prohibiting minors (< age 17) in an abusive relationship from accessing civil orders of protection barring minor abusers from contacting victims without parental consent, or proof of marriage, cohabitation, and share child custody (Break the Cycle, 2010; Hoefler, Black, & Ricard, 2015). This is concerning as CPOs are sometimes the only option available to rural youth, unlike urban youth who have access to an expanded menu of services (e.g., counseling services) (Sianko et al., 2019). An inability to get a CPO, temporary financial assistance, and the lack of teen-specific language in state statutes hinder full utilization of legal support and hampers perpetrator accountability.

It is essential to point out that rurality is not correlated to flaws in anti-TDV policymaking. Several Midwestern states, such as Ohio, Illinois, Utah, Nebraska, and Georgia, are simultaneously considered predominantly rural but have passed anti-TDV legislation in schools. However, the state of Missouri lacks any state laws authorizing the inclusion of healthy relationships and dating violence education in school curricula for school districts or charter schools (National Conference of State Legislatures [NCSL], 2018). Beginning in the 2020-21 school year, Missouri schools are required to provide trauma-informed, developmentally appropriate sexual abuse prevention training to students in grades 6-12.

Missouri is also not one of 23 US states electing to offer dating violence prevention education (NCSL, 2018). In 2016, the bipartisan Missouri Teen Dating Violence Prevention Education Act (MO SB713) was first read in the Senate but not passed (25% progression, died in committee). Several other states allow for the addition of dating violence prevention in the school curriculum, policies addressing penalties for abusers, procedures for filing a protective order, policies on cyber-abuse and bullying, procedures for disclosing or reporting abuse. However, these guidelines for handling incidents of TDV are lacking or not as clear in some states, necessitating the need for policy and practice improvements at the local and state policy level.

Access gaps with rural populations still exist

Multiple community-level risk factors exacerbate the unique social ecology of rural youth. Issues like gun-related suicide and accidental firearm mortalities (Nance, Carr, Kallan, Branas, & Wiebe, 2010; Pappas, 2019), concentrated and persistent rural poverty, residential instability, family disruption (i.e., non-intact families due to incarceration/drug involvement, kinship families, stepfamilies), social-cognitive risk factors, neighborhood economic disadvantage, invasive social cohesion (and antithesis to community connectedness) and collective efficacy approving of pro-violence norms, religiosity favoring female subservience, undertrained victim service providers, distrust for medical services, sparse distribution of first responder services (law enforcement coverage, health providers) with limited service hours are common in rural areas; typically designated as Health Professional Shortage Areas in medical, dental, and mental health. Scant qualitative research to date considers the underlying factors of TDV among rural American youth, counting family and neighborhood risk factors (Breiding et al., 2014; Foshee et al., 2015), as rural youth fall through gaps in dating violence research-to-practice intervention efforts. It does not help that marginalized rural populations are distrustful of IPV interventions, especially those organized by governmental agencies (Edwards, 2014; Lichtenstein & Johnson, 2009). Most interventions ignore these sociocultural determinants of TDV and the use of TDV services (Capaldi & Langhinrichsen-Rohling, 2012).

Theoretical Framework Guiding the Health-e BROS! Study

Relational Dialectics Theory (RDT)

Dialectics play a key role in understanding circumstances of conflict, contradiction, opposition that present as a "ceaseless flux" in most relationships (Riegel, 1979, p. 14). Baxter and Montgomery (1996) framed the Relational Dialectics Theory (RDT; Baxter, 2004; Baxter & Montgomery, 1996) to capture some of these contradictions as "negating and simultaneously opposing" aspects of interpersonal relationships expressed through competing discourse (Baxter & Montgomery, 1996, also see Baxter & Norwood in Braithwaite & Schrodt (2014)). As a heuristic framework for understanding these contradictions, RDT stems from the field of communications and is described as an interpersonal theory of communication that depicts dialectical contradictions as opposing needs articulated and negotiated within relationships (Baxter & Montgomery, 1996). Baxter and Montgomery (1996) ascribed their inspiration to prior work done by Mikhail Bakhtin on dialogism (1981). Central to the RDT are *contradictions* or the "dynamic interplay between unified oppositions" that characterize relationships (Baxter & Montgomery, 1996, p. 8). These contradictions are negotiable and can often be a source of compromise and conflict resolution in relationships. As core examples, Baxter and Montgomery (1996) described relationship contradictions clusters such as *autonomy-connectedness*, *openness-closedness*, *novelty-predictability* (Baxter & Montgomery, 1996). However, dating violence is a period of heightened dialectical struggle characterized by a breakdown in essential communication and communicative management practices. Beyond dialectical tensions in relationships, this study focused on tensions in how TDV danger was viewed and communicated. We contend that reflecting on youth risk narratives in this manner offers a complex perspective that has implications for planning, adapting, and implementing anti-TDV interventions.

Baxter (2011) proposed a more critical and power-sensitive variant of the RDT (called RDT 2.0) to center the power dynamics and discursive inequality that often characterize majority and minority discourse in society (see Baxter & Norwood in Braithwaite & Schrodt, 2014). There is growing awareness of the *dialectical* nature of dating violence, particularly within rape culture.

Dialectics are philosophical processes describing contrasting polar views at once negating but true realities (Baxter & Montgomery, 1996). Examples of common dialectics in dating violence may include the *victim-perpetrator* dialectic of sexual assault (i.e., “he said – she said”), the *victim-survivor* dialectic (both with different connotations), and the *victim-victimizer* dialectic (the same person being both abused and an abuser) (Rasmussen, 2012).

In addition to providing a logical way of thinking about communication in dating relationships, dialectics capture tensions in abusive relationships, understandings of abuse dynamics, and societal responses to TDV. The study argues that the paradox of *danger* and *safety* in the same relationship is a significant dilemma, particularly for young people new to dating and navigating dating relationships. For example, the persistence of sexual assault and rape culture on college campuses can partly be attributed to dialectal contradictions. Scholars show youth narratives of sexual consent explain some of these dialectical tensions, such as wanting and not wanting sex notes in Muehlenhard and colleagues’ (2016) work on token-resistance. Youth discourse is often riddled with inconsistencies when it comes to negotiating sexual consent. In one study, college students perceived males as *sex initiators* and females as *sex gatekeepers*, levying strict sexual and gender roles that could lead to coercive consent negotiations and sexual aggression (Jozkowski & Peterson, 2013). These inaccurate perceptions often underlie language surrounding victim-blaming, rape myth acceptance, and violence minimization (Worthen & Wallace, 2017).

Dialectical ambiguities are also present in the design of sexual assault prevention programs and policies on campuses, with language and strategies created to favor heterosexuality and heteronormative relationships or play up sexual double standards (Jozkowski & Peterson, 2013). Muehlenhard and colleagues’ (2016) found at least three separate definitions of “sexual consent.” Another study found over 200 descriptions of “violence” (Hamby, 2017), suggesting a need to clarify dating violence types and contexts. Dialectical strains and paradoxes in youth narratives can become targets of anti-TDV programs to raise awareness of dating violence issues.

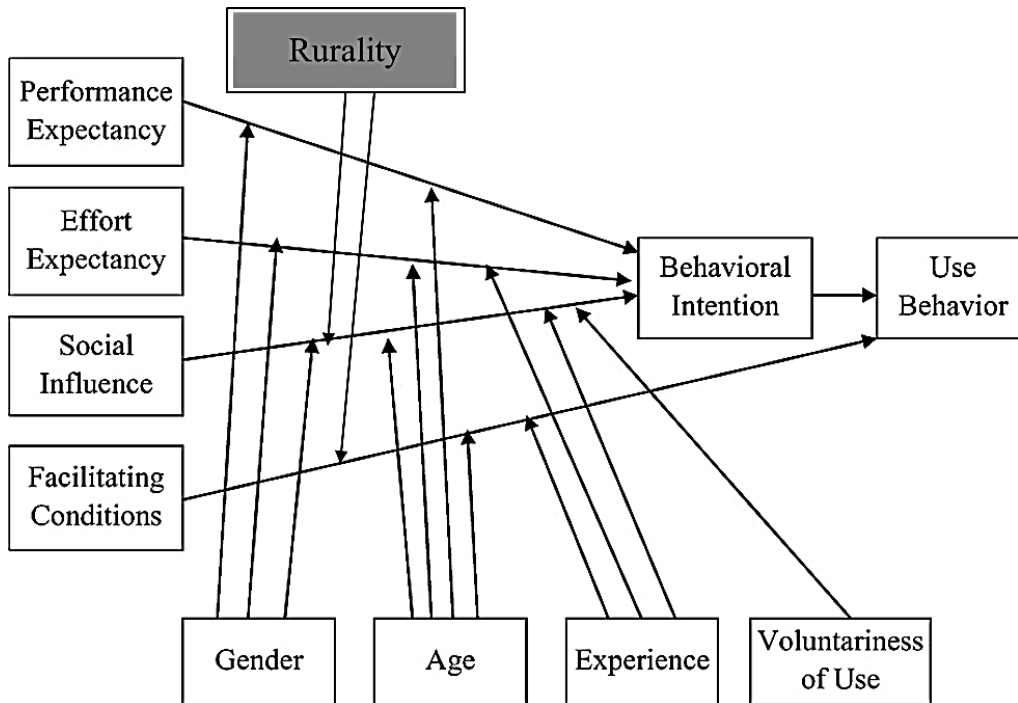
Baxter and Scharp (2016) recommend broadening dialectical research to culturally sensitive contexts with marginalized groups, where dialectical influences are poorly understood. Rural culture presents such an opportunity to examine dialectical tensions in youth narratives of dating violence risk and protective factors. Several scholars have employed relational dialectical theory in understanding partner violence (Baker, 2001), workplace sexual harassment (McGuire, Dougherty & Atkinson, 2006), and narratives about online dating (Fox, Osborn & Warber, 2014). Besides, qualitative interpretive practices come highly recommended by adolescent health researchers advocating for a gender-aware approach to understanding TDV risk (McCauley et al., 2015). Adolescent and young adult perceptions of their vulnerability to dating violence and the risk of becoming violent themselves can influence their TDV experiences and help-seeking/help-giving activities. Any successful TDV prevention work with young people must address these perceptions, whether they present as contradictions, confirmations, or paradoxes in youth narratives. Accordingly, since risk conceptualization often encodes meanings, attitudes, and behaviors, focusing on risk communication and risk perception is critical to behavior change for behavioral issues beyond dating violence. Still, there is little evidence that rural dating violence has been studied through a dialectical lens.

Unified Theory of Acceptance and Use of Technology – or UTAUT

Several theories and conceptual frameworks have been used to implement TDV prevention interventions. More common ones include the theory of planned behavior (TPB), social learning theory (SLT), social cognitive theory (SCT) (Bandura, 2001), feminist theory, empowerment theory, the power and control wheel, and the theory of gender and power. However, this dissertation study was guided by an integrated technology adoption and behavior change conceptual framework called the *Unified Theory of Acceptance and Use of Technology* – or UTAUT (Venkatesh et al., 2003; Venkatesh, Thong, & Xu, 2012). This theoretical framework originates from the information science and technology disciplines as a derivative of the classic Technology Acceptance Model (TAM)

(Davis, 1989) and has been used in organizational settings to study the adoption of new technologies to improve employee productivity (Venkatesh et al., 2003).

Figure 1. Unified Theory of Acceptance and Use of Technology (UTAUT; Venkatesh et al., 2003)



Davis (1989) first proposed the key constructs of **perceived usefulness** and **perceived ease of use** of innovation in the Technology Acceptance Model ([TAM], Davis, Bagozzi, & Warshaw, 1989). Furthermore, TAM-2 (Venkatesh and Davis, 2000, 2003) and TAM-3 (Venkatesh and Davis, 2000, 2003) were formed after the first TAM (Venkatesh & Bala, 2008). Venkatesh et al. (2003) built on all three prior TAM models and included four key constructs: **performance expectancy (PE)**, **effort expectancy (EE)**, **social influence (SI)**, and **facilitating conditions (FC)** to predict behavioral intention to use a technology and actual technology use and four moderators (i.e., **age**, **gender**, **experience**, and **voluntariness**) (Venkatesh et al., 2003, 2016). The PE, EE, SI constructs influence intentions to use, and FC directly predicts technology use behavior (Venkatesh et al., 2003). With published guidance for modifying the UTAUT conceptual framework

from Venkatesh and colleagues (2013), this dissertation study considers **Rurality** as an important facilitator.

Self-described by its authors as a high-quality theory following numerous rigorous evaluations (Chen & Chan, 2014; Steinke, 2015) and with several adaptations of the UTAUT conceptual framework in research (for example, Borrero, Yousafzai, Javed, & Page, 2014; Liew, Vaithilingam, & Nair, 2013; Wang and Wang, 2010), the UTAUT composite model is a merger of eight technology adoption and behavior change theories, including the Theory of Planned Behavior (TPB), social cognitive theory (SCT), the Technology Acceptance Model (TAM), the combined theory of planned behavior/technology acceptance model, and diffusion of innovations theory.

Whereas previous researchers relied on technology acceptance models and theories to frame online user habits, inform intervention design, and predict the success of new technologies, The UTAUT conceptual framework has recently been used to obtain feedback on preferences among various user groups, including stimulant-using HIV-positive MSM (Horvath et al., 2016), and the elderly (Cimperman et al., 2016; Hoque & Sorwar, 2017). The improved UTAUT II conceptual framework has found use in modeling adolescent and young adult technology adoption/use behaviors, as well as in modeling gender-based differences in technology use (Wang & Wang, 2010). A longitudinal validation study showed that the original model (i.e., UTAUT I) explained 70% variance in behavioral intention and 50% variance in actual use (Venkatesh et al., 2012).

Reviewers may be skeptical of the UTAUT model but should note that the UTAUT conceptual framework takes into consideration the shortfalls of only using popular behavioral change models like the theory of planned behavior (TBP), an extension of the theory of reasoned action (TRA; Fishbein & Ajzen, 1975). At its crux, the widely used TPB adequately underwritten our understanding of how attitudes/beliefs, subjective/injunctive norms, and perceived behavioral control predict behavioral intentions, which in turn predict actual behavior (Fishbein & Ajzen, 1975, 2010). However, health behavior researchers have criticized the one-dimensional nature of TPB for

its inattention to socioecological and environmental factors (i.e., facilitating conditions), imprecision in predicting behavior in longitudinal studies, marginal effectiveness in modifying actual change in behavior short of behavioral intentions (Sniehotta et al., 2014). Additionally, the TPB has been described as too 'logical' or 'rational,' thus failing to clarify the role of unplanned behaviors (Barber, 2012) and unconscious influences (Sheeran, Gollwitzer & Bargh, 2013).

The UTAUT conceptual framework addresses some of the shortcomings by including the effects of immediate social influences (subjective norms about mHealth use, teen reputation, gender norms, dominant forms of masculinity effects) on TDV risk and help-seeking. Further, the UTAUT model takes into consideration availability of and access to digital health intervention (i.e., device ownership, internet connectivity, internet access), the perceived usefulness of TDV technology-based interventions to meet behavioral goals (i.e., performance expectancy), the ease/interactivity of using the intervention (i.e., effort expectancy). Expanded contexts of the UTAUT conceptual framework have considered the financial cost of the intervention and the hedonistic value (i.e., gratification and enjoyment) derived from using the intervention (Crutzen, Peters, Portugal, Fisser, & Grolleman, 2011; Dwivedi, Rana, Jeyaraj, Clement, & Williams, 2017; Venkatesh et al., 2012). Another critically important consideration is the ability of the app to improve safety conditions for a victim of TDV. All these issues remain crucial to youth users of technology.

This study's interview guidelines explored UTAUT constructs as they apply to rural male youth and their intention to change behavior using a tailored technology-based intervention. This study will explore:

- A. **Performance expectancy (PE)** - (or "the degree to which rural male youth expect to benefit from a TDV app") (Chang, 2012; Venkatesh et al., 2003).
- B. **Effort expectancy (EE)** - ("the degree of ease associated with the use of a TDV digital intervention") (Chang, 2012; Venkatesh et al., 2003).

- C. **Social influence (SI)** - (the importance of social determinants on TDV experiences and help-seeking) (Chang, 2012; Venkatesh et al., 2003).
- D. **Facilitating conditions (FC)** - (or “perceptions of the digital and traditional resources and support available to perform a behavior”) (Chang, 2012; Venkatesh et al., 2003).
- E. **Moderators:** *Age*, (6) *Gender*, (7) *Past experiences* with other technology-based interventions, (8) *Willingness* to use a technology-based intervention, and (Chang, 2012; Venkatesh et al., 2003)
- F. **Rurality** – accounting for regional factors influencing the uptake of technology-based interventions, including internet connectivity issues, sparse services, concentrated poverty, family disruption.

These are all critical moderating factors in the use of digital interventions (Fitzpatrick, Darcy, & Vierhile, 2017; Glass et al., 2017; Suzuki & Calzo, 2004). In addition, a gender-aware male-only gender-separate study will consider social role expectations and how they impact rural male use, adoption, and maintenance of health behavior technology. These insights can inform the planning of digital health interventions to cater to unique user needs across all genders and the development of technology-adoption models that cater to non-binary characterizations of gender. Of note, Venkatesh et al. (2016) suggest two significant limitations with their UTAUT. These include the model’s relatively low parsimony owing to its complex nature and cross-interacting moderation effects and the “lack of a meso-level formulation of the model” (Venkatesh et al., 2016).

Positive Youth Development (PYD) Framework: A Remedy to a *Stormy* Adolescence

A counterbalanced position to the defunct “stressing and storming” ideologue that focused on the inherent brokenness and attributed disorder of at-risk youth is the Positive Youth Development framework (PYD). PYD focuses on the social ecology of today’s youth leverages their inherent strengths and ecological assets as taken-for-granted resources in the design of violence prevention interventions (Lerner, Boyd, & Du, 2010). This strength-based philosophy will be the anchor of the Health-*e* BROS! Study design and will form the crux of the Positive Youth

Development (PYD) framework used in this study. This strength-based philosophy guaranteed that potential *solutions* and recommendations from rural youth were obtained through meaningful conversations and iteratively detailed contributions. Using a PYD will position rural youth “as resources to be developed rather than as problems to be managed” (Lerner et al., 2005, p. 7). Thus, the Health-*e* BROS! Study obtained contextual knowledge from rural youth males with insider knowledge on how, where, what, and when they want specified support and psychoeducational services related to dating violence.

Positive Youth Development “encompasses **the Five C’s of youth development:** (Competence, Confidence, Connection, Character, and Caring) (Lerner et al., 2005; Lerner, Boyd, & Du, 2010). A sixth C (Contribution to self and society) — or the concrete conclusion of all the other C’s has been added (Lerner, Boyd, & Du, 2010). Youth demonstrating low aptitudes of the 6 C’s are at risk for developing personal, social, and behavioral complications, whereas those with traits attributable to the 6 C’s demonstrate resilience to these problems (Lerner et al., 2005). Finding from the longitudinal 4-H Study of Positive Youth Development (4404 adolescents in 34 states at Wave 4) indicate that pre-adolescents indicating these aptitudes are positively engaged and have been shown to rate low in internalizing and externalizing behaviors, substance use, depression, bullying, delinquency, and high in positive contribution (Lerner, Boyd, & Du, 2010; Lerner et al., 2005). Scholars from this study found that social support (not school or community resources) were the most critical asset in the PYD framework (Lerner et al., 2005). The strongest predictor of PYD in this study was family relationships and activities (e.g., eating dinner together).

Varying levels of risk-taking, sensation-seeking narratively characterize adolescence. Commonly cited issues that affect youth include substance dependency and abuse, puberty, parent-teen relationships, adolescent identity crisis, academic and social performance, crime exposure, violence exposure, mental health issues, and conduct problems (Steinberg & Morris, 2001). The preliminary agenda in the adolescent literature has focused on “de-dramatizing adolescence” with

“the goal of describing, explaining, predicting, and ameliorating problematic behavior” (Steinberg & Morris, 2001, p. 85).

In contrast, a focus on PYD is substantiated by capitalizing on already existing rural youth assets in the community. In line with this study, this may include trusted adults with whom the youth have formed trusting relationships. As well as creating interpersonal skills and prosocial competencies related to a healthy relationship and conflict-resolution, encouraging self-agency (e.g., to recognize the signs and precipitating events of partner violence and to be active bystanders), leveraging local talents (i.e., participatory youth innovation), and fostering an enabling environment with family and community input, resources and opportunities. PYD identifies specific assets, strengths, and resources that youth possess and builds on them by working with youths to create sustainable solutions to prepare them for life and adulthood. Policies are designed to consider adolescents as assets and key informants (not as a problem) to the community. Lerner et al. (2005) describe well-designed youth programs as those that possess the “Big Three” developmental assets of effective programming: (1) positive and long-term relationships between young people and trusted adults, (2) focus on building and honing life skills using out-of-school activities (i.e., combining sports and youth development programs) (3) opportunities for youth as beneficiaries and leaders in valued community programs (p. 7). In this dissertation study, fidelity to PYD was the guiding philosophy using a strengths-based approach to work with rural youth.

Chapter Summary

This chapter presented a comprehensive literature review that described adolescence and young adulthood (AYA), summarized TDV types and prevalence rates, described TDV risk and protective factors, explained current interventions and their drawbacks, and presented a rationale for engaging boys and men in TDV prevention.

CHAPTER III

Research Methodology

This chapter describes the research methodology, study design, theoretical frameworks, plan for sampling, data collection, data analysis, and expected findings from this dissertation study.

Specific Aims and Research Questions

Using qualitative methods, this study explored two research questions with two aims:

AIM 1: To identify rural young males' perceptions of risk and protective factors of dating violence in rural communities.

- RQ: What are their risk factors for TDV?
- RQ: What are their protective factors for TDV?
- RQ: What role does gender and masculinity play in promoting (or protecting from) TDV among rural males?

AIM 2: To explore young rural male acceptability and preferences for content, features, and functions expected in a TDV prevention technology-based intervention.

- RQ: What are their perceptions of technology-based interventions for TDV prevention?
- RQ: What are the barriers and motivators of use/uptake of TDV technology-based place-based interventions among rural males?
- RQ: What type of content and features would you like to see in a TDV technology-based intervention for rural males?

Research Design

Two qualitative traditions were employed, one for each specific aim. Specifically, this study used an interpretive approach (Aim 1) and a qualitative descriptive approach (Aim 2). Both

approaches incorporated semi-structured, open-ended interview questions and were well suited to guide each specific aim and research question.

Study Design & Methods

The present study leveraged a gender-separate qualitative approach to obtain meaningful disaggregated data as part of a gender-transformative method to meaningfully including boys and men in dating violence prevention work. Gender-transformative approaches consider the roles of norms, beliefs, and attitudes in specific social contexts (Ruane-McAteer et al., 2019). Studies using *qualitative description* and *qualitative interpretive* approaches typically use moderate sample sizes ranging from 10–50 (Sullivan-Bolyai et al., 2005). However, given the characteristic low turnout of male adolescents (not to mention male survivors) in TDV studies, this study recruited participants using two sequential phases:

1. Three male-only focus groups:
 - a. Two focus groups with young rural males ages 18-24 years, and
 - b. One focus group with young rural males ages 15-17 years,
2. Individual in-depth interviews with 13 rural adolescent males (ages 15-24).

Study Recruitment

This study employed two non-probability sampling techniques: Convenience and Purposive sampling (Etikan, Musa, & Alkassim, 2016; Palinkas et al., 2015). Combining both strategies supported the equitable representation of *all* adolescent and young adult male cohorts. Conveniently sampling rural male adolescents accounted for logistical practicality considering “easy accessibility, geographical proximity, availability at a given time, or the willingness to participate are included for the purpose of the study” (Etikan, Musa, & Alkassim, 2016, p. 2). Leaving the study’s rural sites broad maximized sampling goals to provide “information-rich” focus groups and prevented sampling bias (Palinkas et al., 2015; Patton, 2002).

An IRB approval was received from the University of Missouri Institutional Review Board with ‘Consent with Waiver of Documentation,’ and parental permission was waived by the IRB, as this research did not pose greater than minimal risk. Another reason for this waiver was to protect young adult males (age 15-24) who were using sensitive community services that may not require parental permission to access (e.g., LGBTQ youth services, teen DV services). And so, requiring parental consent for our study for youth seeking these confidential services may breach privacy and confidentiality, particularly in small rural towns. Notably, without this waiver, we would not be able to practicably carry out the research study as outlined without running the risk of excluding research participation young males (ages 15-24) from socially disadvantaged backgrounds.

A two-step consenting process was conducted. Participants were prompted to consent *Yes* or *No* during online enrollment, and a second consenting process was done before each focus group or interview session. Recruitment followed a purposive and convenience sampling strategy to recruit rural male youth using custom Facebook and Instagram ads. In addition, flyers were emailed to two youth-serving organizations. The study was also advertised twice in a weekly campus bulletin in a large US Midwest university. Male- and sports-themed photos were used in Facebook and Instagram ads to increase curiosity, provide a sense of belonging, and a call to action. Titled the Health-*e* BROS! Study: (Better and Healthy Relationship Outcomes), I described the study as “An Adolescent and Young Adult Health & Relationship Study.” On study materials, the words ‘dating violence’ was avoided not to problematize this topic or study. Ads directed participants to an online Qualtrics™ enrollment form. Social media ads were programmed to target rural US counties by zip codes. Participants completed brief online 11-question eligibility/demographic questionnaires. When enrolled, zip codes were compared to the 2010 Rural-Urban Commuting Area (RUCA) codes to establish eligibility. Developed by the US Department of Agriculture (2014), RUCA codes have been used to categorize US regions based on population density, urbanization, and commuting flows. Eligible participants were then contacted via their preferred and safe contact method and scheduled to a focus group. Since they were in different time zones and had various time constraints, if a

suitable time for a focus group could not be identified, an individual interview was scheduled. Ineligible participants were thanked and received no further study-related communication.

Participant Selection

Eligible participants identified as male, 15-24-years old, having ever dated since age 13 (serious or casually dating), comfortable speaking and reading in English, with access to an internet-connected computer or phone, and living or schooling in a rural or medically underserved area or health provider shortage area (HPSA) – as established by RUCA codes. Past dating abuse history was not an eligibility criterion. While there is no maximum or minimum sample size in an interpretive study, participants were sampled until data saturation was achieved - a point where no new information was identified (Corbin & Strauss, 2008). Ineligibility was based on an inability to meet any of the above criteria—no harm or risk accrued to those excluded on account of not being a part of this study.

Rationale for Age Stratification

Building on the effects of developmental and chronological age on peer culture and intergroup dynamics is essential in studies of a sensitive nature, such as with TDV. Participants in this study were stratified by age: middle adolescence (15-17-years) and emerging adults (18-24-years). Stratification by age group accounted for distinct age-graded stages of development and a variety of experiences. Stratification by age was expected to explain how rural young males' model unhealthy or healthy relationship behaviors as reinforced by their social convoy and environment.

Moreover, for emerging adults (18-24), relationship dynamics change drastically, as this age coincides with adulthood transitions, changes in the numbers of sexual partners, changing importance placed on relationships, transition to early parenthood, the experience of premarital cohabitation, first job experiences with new financial obligations, new gender roles in the home, and the start of co-parenting (Pensak, 2015). All these issues significantly impacted the contexts in which

dating violence may occur but proved challenging to include in this study's analysis and so are not reflected in findings.

Study Procedures

Using a 14-question semi-structured and open-ended interview guide (not distinguished by age-group) (See Appendix A), three focus groups via videoconferencing and 13 individual phone interviews were conducted. An information sheet clarified any concerns that parents/guardians may have had about the study in the form of a Parent Letter (See Appendix H). Participants provided informed assent and consent and were informed the study was voluntary and confidential. Before each interview, participants watched or listened to two short video vignettes that contextualized discussions of TDV. The first video was of a young woman who was being physically abused (not explicitly shown) and psychologically abused by a male partner, using isolation, social media monitoring, and stalking tactics. The second video showed a young man being assaulted verbally and physically on school grounds by his girlfriend. At the end of each video, the National Dating Violence 24/7 text, phone, and live chat service number were displayed. A safety protocol was created for critical incidents or any adverse events (none occurred during this study) (Appendix F). An open-ended interview guide was used with rural young males to examine perceived risks and protective factors for TDV. For all age groups, the same interview guide was used. Questions in focus group discussions and interviews were divided into two sections.

Section One focused on perceptions of risk and protective factors related to the rural context and gender and social norms (Aim 1) and had open-ended questions analyzed using an interpretive and dialectical heuristic framework. A dialectical framework was not initially intended for Aim 1. Our analysis concentrated on organizing themes within two main themes of *risk* and *protective* factors in this first stage of analytical coding using qualitative descriptive lens. However, as the themes emerged, we observed recurrence, reiteration, and dynamism of unexpected dialectical tensions detected in participant narratives. Because dialectics emerged as a salient analytic category, a second-stage analytical process concentrated on dialectical tensions to examine contradictions,

paradoxes, and dualisms. The research team eventually identified the Relational Dialectical Theory as a helpful way to articulate the dialectical tensions around dating violence risk and protective factors with rural young males. This process is detailed in Chapter 4.

Section Two focused on (1) Their perceptions of technology-based interventions for TDV prevention and (2) Barriers and Motivators for using this type of intervention (3) the Wishlist activity. Sample questions asked include: “How does masculinity (or “being a man”) play a role in abusive or violent relationships?” and “What kind of features/function/resources do you think would be useful in a TDV app?” To ensure that we did not overlook any design, content, or topic areas aspects that we asked participants at the end if they had anything to add or wanted to change their answers to a previous question or had any follow-up questions. Questions in Section Two (including the Wishlist questions) centered on the UTAUT theoretical framework and drawing on previous dating violence studies with adolescents. We modified the interview guide iteratively to incorporate the feedback we had not previously considered or planned, or spontaneous probes participants identified.

Measures & Data Collection

Qualtrics™ Form: Sociodemographic & Eligibility Questionnaire

An anonymous, self-administered online Qualtrics™ form fillable on a smartphone or PC recorded 11 demographic and eligibility questions during enrollment. This form was accessible by a URL placed everywhere the study was advertised. This form described the study objectives, *why*, *how*, *where*, and *when* data will be collected, including the importance of the data, how it will be used, planned incentives (e.g., gift cards), and dates for any upcoming data collection activities (e.g., individual interviews or focus groups). Participants were prompted to consent by answering Yes/No to participate in the Health-*e* BROS! study after reading an introductory section. After consenting, the first portion of the Qualtrics™ form collected all study-relevant demographic data like those on the latest version of the National Study of Adolescent Health survey (Add Health) and personal contact information. The second portion of the Qualtrics™ form determined eligibility and so collected information on age, sex, gender pronouns (he/him, They/Them), rural location, work or

school status, ability to read and understand English, access to safe computer/smartphone, and any past dating since age 13. Of note, a second consenting process was done before each focus group, or interview was done.

Focus Group & Individual Interviews

Focus groups were conducted online via video conferencing, and individual interviews were conducted over the phone. All sessions were conducted at a convenient time (i.e., Saturday evenings to include out-of-school teens). Focus groups allowed for topic elaboration and debates as little was known about the subject of interest and reduced the influence of the researcher, whereas individual interviews allowed for rich and in-depth data reflection of rural youth's engagement with TDV, and help-seeking social process captured and understood. Individual interviews also helped circumvent issues with groupthink and enabled the collection of “rich deep data through one-on-one discussion and probing” (Milne & Oberle, 2005, p. 414). Another rationale for using individual interviews was to reach those who would instead not be interviewed in a group setting for various reasons.

Both focus groups and individual interviews offered an opportunity to collect a unique kind of data. With the influence of peer culture and social desirability biases, our data revealed complementary or opposing viewpoints – both of which are important to the study’s specific aims are reported in Chapters 4 (Aim 1) and 5 (Aim 2). The advantage of the focus group process was that it allowed study participants to expand on views expressed by other participants and perhaps made it easier to engage with a complicated issue such as dating abuse in what should be a “safe space.” Focus groups were purposively arranged with members of the same age group to create a comfortable environment and will clarify age-specific perspectives and needs.

Focus group & individual interview activities:

1. **Orientation** – At the beginning of the session, the PI conducted a brief introductory orientation session and 5-minute ice-breaker activity. This activity engendered trust and established rapport. Participants were informed of what to expect, including study

procedure, the intent of the study, any foreseeable risk, and their rights to terminate participation in the interview session at any time without consequence. The PI explained that the session would be audio-recorded, and audio files were anonymized. Next, the PI explained the study, going over the format of the session from beginning to end. Participants were prompted to ask any clarifying questions at this point. Participants consented before each session, as well as a description of participants' rights.

2. **Video Vignette** - Before each interview, participants watched or listened (during phone interview) to two short video vignettes that contextualized discussions of TDV. The first video was of a young woman who was being physically abused (not explicitly shown) and psychologically abused by a male partner, using isolation, social media monitoring, and stalking tactics. The second video showed a young man being assaulted verbally and physically on school grounds by his girlfriend. At the end of each video, the National Dating Violence 24/7 text, phone, and live chat service number were displayed. Thereafter, focus group discussion commenced and lasted an average of 60 minutes, while individual interviews lasted 45-60 minutes. Focus groups will be led by the PI (trained in ethics, data and participant safety, crisis counseling, and youth engagement). This process was guided by a semi-structured interview guide with open-ended questions developed for each of the study's aims.

3. **Wishlist Activity**- In concluding each interview or focus group, a needs-elicitation strategy was used to collect and count "hard data" on unmet needs and TDV technology-based intervention preferences missed in the focus group discussions (Trochim et al., 2004, 2006). Participants were asked to list or itemize expectations for what contents, design, and user features they would like to see in a *hypothetical* TDV technology-based intervention designed for rural youth perpetrating or experiencing partner violence. Even though wishlisting was a subjective activity, prior use of this needs-elicitation strategy has uncovered consensus around specific standout 'wishes' as well as concerns in health disparity

settings (Trochim et al., 2004, 2006). Wishes are described using summarizing descriptive methods in Chapter 5 arranged by topic, occurrence in participants' description, and by relevance to this study (Neergaard et al., 2009).

Based on how much participants wanted to share, the PI allowed for flexibility in discussions without strict adherence to the interview protocol. At the end of each focus group or individual interview session, a de-briefing activity followed. Participants were asked for observations, clarifications, and critiques of aspects of the session. Gift cards were emailed to participants completing focus groups (\$20) and individual interviews (\$20). Participants were informed of the likelihood of follow-up individual discussions by phone, video, or face-to-face, although no follow-up interviews were conducted. The audiotapes and transcripts were not connected to any names or personal identifiers. To maintain the confidentiality of the participants, only their ages were allocated to the participant quotes included in the analyses and conclusions.

Semi-Structured Interview Guide

The 14-question semi-structured interview guide was constructed by the PI with few questions adapted (Questions 1-4) from another study in the parent study already described. The adapted questions were in *Section One* of the interview guide and were reviewed by a youth advisory board in the parent study made up of teens age 15-17 years. These teenagers offered detailed input on the wording and phrasing of the questions to ensure that they were understandable to the participants and that they were relevant to the study's objectives. A final draft of the interview questions was reviewed by the PI's dissertation committee prior to use. This committee had experience and extensive publications on partner violence, qualitative research, and communication theories. The PI used the same 14-question semi-structured guide for the focus group and individual interview sessions across all age groups. The first portion focused on risk and protective factors for TDV, centering how these factors were described. The second half of the interview guide (Question 10-14) was structured based on the Unified Theory of Acceptance and Use of Technology (or UTAUT) (Venkatesh et al., 2012), albeit starting with *grand tour* questions. Focus groups took

between 60 minutes to complete, including completing missing information on the sociodemographic form, a brief orientation to the study, and other study activities. To avoid data loss, each interview was audio recorded using two devices: a cloud-based recording system and a Sony digital recorder during Zoom or Google Voice call.

All interviews were audio-recorded and transcribed verbatim by the PI and a paid transcriptionist resulting in 170 pages of transcription. The transcriptionist was supplied by the university transcription office and was trained in maintaining confidentiality and research ethics. All study materials and files only included the study ID number (demographic data, transcript of the interview, audio recording). Any potentially identifying data within the transcriptions were redacted, and the audio recordings were destroyed following the transcription process. Any person with access to data will rigorously follow procedures to ensure the confidentiality of data.

Figure 2: Sample Interview Guide Questions (Full Interview guide in Appendix A)

Aim 1	Aim 2
<ol style="list-style-type: none"> 1. Defining Healthy & Unhealthy Relationships <ol style="list-style-type: none"> a) What do you understand by a healthy/unhealthy relationship? b) What kinds of actions/behaviors demonstrate an unhealthy relationship? 2. What do you think are some causes of abusive or violent relationships? <ol style="list-style-type: none"> a) Can you give examples? b) Can guys be abused? c) What causes that? 3. What role does masculinity (or "being a man") play in abusive or violent relationships? Can you explain? 4. How does living in a rural area (or small community) contribute to abusive relationships? 5. What would most guys do if they were in an abusive relationship? Like what would they do about it? <ol style="list-style-type: none"> a) Do you think most young guys would know what to do about it, or how to get help? 	<ol style="list-style-type: none"> 1. Performance expectancy - (the degree to which users expect to benefit from digital intervention); 2. Effort expectancy - ("the degree of ease associated with the use of a digital intervention"), 3. Social influence - ("defined as the degree to which an individual perceives that important others believe he or she should use the new system"), 4. Facilitating conditions - (or perceptions that there are objective resources, infrastructure, and support available to perform a behavior), 5. Age - "Do you think young men your age will want to use an app like this?" 6. Gender - Differences in digital habits and help-seeking 7. Past experiences - "If you had to delete every app on your phone except 3, what three will you keep? Why?" 8. Willingness to use - "Do you think your friends will want to use an app like this?" 9. and Rurality - accounting for regional factors influencing the use/uptake of digital interventions

Data Collection Sheet

For purposes of this study, a data collection sheet on Excel was used to record every interview and focus group date, interview location, length of the interview, contact log, number of participants present, and any adverse or positive occurrence. Data recorded on this sheet was used to describe the conditions of the study and to itemize participant characteristics.

Ethnographic Fieldnotes

Reflexive notes were documented to be descriptive and based on frequent entries during the study (Moustakas, 1994). Field notes reinforced ways to attain data saturation and capture group interaction and dynamics, and bracketing in any personal biases (Creswell and Miller, 2000; Moustakas, 1994). In addition, the PI's field notes identified (1) potential challenges with conducting a future pilot study with rural male youth, (2) issues with recruitment and retention of rural youth, (3) issues with acceptability and engagement with technology-based interventions, (4) participant intervention needs, understand requisite resources needed to implement and manage a future intervention, (5) observation of nonverbal communication and cues during video focus groups, (6) other salient points consistent with Steven's 12-questions for group interaction, e.g., "What were the contradictions in the discussion?" "Was a particular member or viewpoint silenced?" "What topics produced consensus or conflict?" (Stevens, 1996, p. 172). Secondary information was documented on recruitment experiences, participant characteristics, study procedures and measures, revisions to data collection processes, quality control for data collection and management, potential intervention acceptability and efficacy, resources, and ability to manage a planned pilot study, and preliminary evaluation of participant responses to a planned pilot of technology-based interventions.

Data Analysis Plan

This study used two qualitative analysis traditions for each Specific Aim (i.e., analytical triangulation). In Aim 1, a Qualitative Interpretive paradigm was used, and in Aim 2, Qualitative Description (QD) was used. A computer-assisted analysis using NVivo (QSR International, Release

1.3) software to ensure more rigor in the data analysis by using clear data coding and thereby reducing research errors and bias.

Aim 1 – Qualitative Interpretive Paradigm

First, transcripts were read and re-read, sorted, and arranged to find emergent codes from three random transcripts. As a result, transcriptions were condensed into meaningful themes that were discussed in weekly team debriefing meetings comprising researchers with experience and extensive publications on partner violence, qualitative research, and communication theories. Following transcription, the PI coded the data using NVivo (QSR International, Release 1.3) and provided an initial coding structure and preliminary codes to the team, who then discussed areas of agreement and ambiguity and addressed predicted, negative, and even differential findings (Creswell & Creswell, 2018). The team reviewed codes to interrogate participant narratives, converging on similar interpretations, thereby establishing ontological criticality (Glaser & Strauss, 1967). Our analysis concentrated on organizing themes within two main themes of *risk* and *protective* factors in this first stage of analytical coding. As the themes emerged, we observed recurrence, reiteration, and dynamism of unexpected dialectical tensions detected in participant narratives. Because dialectics emerged as a salient analytic category, a second-stage analytical process concentrated on dialectical tensions to examine contradictions, paradoxes, and dualisms. The research team eventually identified the Relational Dialectical Theory as a useful way to articulate the dialectical tensions around dating violence risk and protective factors with rural young males.

This two-stage approach contextualized dialectical inconsistencies in how rural male youth made sense of their world using an interpretive lens. Theme labels were selected to capture the essence of participant narratives while also reflecting dialectical qualities and heuristic value. Finally, the team decided on which quotes would best support each theme. Higher-order interpretations are presented after each theme to validate or contrast participant explanations. We also leveraged *reflexive bracketing* in two ways. In team meetings, we first explored our personal biases related to our past work and noise from established literature. Second, the PI kept a journal of reflective statements

detailing methodological and analytic decisions taken during the research (Gearing, 2004; Ortlipp, 2008). In addition, reflexive bracketing helped us examine participant narratives in their true form, considering other factors such as tone, interview specifics, participant demeanor, body language, and meaning cues (Polit & Beck, 2017).

Aim 2 – Qualitative Description Analysis

A qualitative description (QD) methodology using a pragmatic approach guided the interpretation of data in Aim 2. QD is a low-abstraction, naturalistic, low-inference inductive approach used to closely interpret the data (Neergaard, Olesen, Andersen, & Sondergaard, 2009). I chose this method as it is primarily inductive and ideal for describing phenomena from the participants' own experience and own language, problem identification, and idea generation, and is therefore particularly well-suited for needs assessment and intervention development with vulnerable populations (Neergaard, Olesen, Andersen, & Sondergaard, 2009). This approach championed the co-creation of knowledge and ensured participant feedback was not over-analyzed or given connotations beyond the practical and utilitarian needs described during the study (Neergaard et al., 2009). The PI read and re-read each transcript before importing them into NVivo (Release 1.3 by QSR International), where transcripts were analyzed using “*in vivo* coding” to find, sort, and compare codes iteratively. NVivo classified significant codes grouped into “meaning units” in recurring participant quotes.

A modifiable codebook was created from three pilot transcripts. After sorting, rearranging, and comparing codes, we formed categories/subcategories by pooling codes based on commonality, divergence, and logical parsimony (Rossman & Rallis, 2012). Initial themes were grouped and regrouped under main themes. (Creswell & Creswell, 2018). Central themes were then chosen based on generalizations that held true for the data and are accompanied by participant excerpts. The PI performed all interviews, checked the validity of codes, and resolved differing views in weekly debriefing meetings with the research team. The researchers' reflexive notes and bracketing focused on critically appraising every research decision, prior assumptions about rural youth, cross analyzing

the data, and comparing findings with current TDV literature. We used various procedures to ensure authenticity, credibility, criticality, and integrity of this study, including method triangulation using multiple data collection methods (FGD, individual interviews, *wishlisting*), theoretical triangulation (UTAUT model), preservation of the research audit trail, bracketing of research bias in fieldnotes, regular debriefing, and presentation of negative or differential findings (Creswell & Creswell, 2018).

Wishlist Data

Further, “Wishlist” data was analyzed using content analysis to identify participant interview convergence (where they agreed on matching information) and divergence (where there were inconsistencies and discrepancies in participant comments). For example, if user security and privacy are a priority topic on the Wishlist, the number of times privacy is brought up will be noted and will help prioritize this as an unmet need targetable by technology-based intervention.

The PI confirmed emerging codes to ensure reliability and had qualitative data experience and familiarity with QD data analysis. All forms of data were subjected to re-reading and verification as "meanings emerging from the data have to be tested for their plausibility, their sturdiness, their confirmability [and] validity" (Miles and Huberman, 1994, p. 11) and then combined after separate analyses. Finally, data confirmability and verification required comparing final themes with (1) the adolescent dating violence literature, (2) deliberation with the PI's dissertation committee (Lincoln & Guba, 1985).

Chapter Summary

This chapter described the research methodology, study design, theoretical frameworks, plan for sampling, data collection, data analysis, and expected findings from this dissertation study.

Chapter IV

“It’s all Country Boys”: Perceptions of Risk & Protective Factors of Dating Violence Among Rural Young Males: An Interpretive Analysis.

Background: In 2019, one in eight teens reported experiencing Teen Dating Violence (TDV) as physical, psychological, sexual, and online abuse, exacerbated by rural-specific factors contributing to an increased risk of TDV. Rural youth report almost twice the prevalence rate of physical violence, exacerbated by rural-specific risk and protective factors. Even then, rural youth remain understudied and undersampled in the literature. This study was designed to begin to address this gap by focusing on rural youth perceptions of TDV risk revealing discourse around their attitudes, meanings, and actual behavior. Youth perceptions of risk and protection provide a complex and unusual perspective with possible implications (and consequences) for the design, adaptation, and implementation of anti-TDV programs in rural areas.

Methods: Grounded in relational dialectics theory (RDT), this study analyzed data from 27 young males (ages 15-24). About 14 young males participated in three online focus groups, and another 13 completed phone interviews. Using an interpretive analysis approach focused on youth narratives, the purpose of this study is to explore TDV risk communication and risk perceptions among rural young males.

Results: This study leveraged an already scarce resource: *rural male voice*, to identify meaningful ways to prevent TDV among rural males, encourage abuse disclosure, bystander behaviors, and help-seeking, to improve sustainable regional and gender transformative anti-TDV interventions. Using an interpretive, meaning-making, and dialectical approach, we identified two main themes of risk and protective factor dialectics and constitutive subthemes: (1) *Dialectics of Social Tensions* (Language Matters: Abusive vs. Unhealthy Relationship Dialectic; The #MeToo vs. #WeToo Dialectic of Victimhood; Rural vs. Urban Masculinity Dialectic - “It’s All Country Boys”; Present vs. Absent Father Dialectic, (2) *Dialectics of Help-Seeking & Help-Giving* (Religion and Spirituality; Local Preachers; School Guidance Counselors; Peer Mentors & Social Cohesion).

Conclusions: Our findings show a disconnect between participants' narrated attitudes, socio-cultural values, and perspectives on rural dating abuse. These findings have important implications for advocates and practitioners working with rural youth in planning developmentally and culturally appropriate anti-TDV programs and will yield intervention, policy, and research-relevant knowledge by providing a broader framework for the development of theory and effective violence prevention practice.

Keywords: Adolescents, Qualitative Study, Dialectics, Dialectical Tensions, Rural Youth, Dating Violence, Risk Communication, Relational Dialectics Theory.

Introduction

Teen Dating Violence (TDV) is considered an “old disease in a new world” (Murray & Azzinaro, 2019). One in eight US high school students experience forms of TDV, including physical, sexual, psychological, online abuse, leading to adverse and even lethal outcomes, such as adolescent intimate partner homicide (Adhia et al., 2019; Breiding et al., 2014). TDV occurs with unmarried, cohabiting, or romantically or causally involved dating partners irrespective of intimacy, gender or sexual identity, and intent (Santrock, 2016).

According to the CDC’s Youth Risk Behavior Surveillance System (YRBSS), US male and female youth report experiencing physical dating violence (8.2%), sexual dating violence (8.2%), electronic bullying (15.7%), and bullying on school property (19.5%), and online bullying victimization (15.7%) based on past-year prevalence (Basile et al., 2019). Female and LGBT+ students are most often victimized (Basile et al., 2019). Furthermore, more girls than boys report perpetrating verbal and physical assault, and more boys report sexual and physical abuse toward partners (Niolon et al., 2015; Vagi et al., 2015). However, females report more severe and chronic effects from TDV (Katz, Courtney, & Sapiro, 2017).

Different risk and protective factors inform current responses to TDV (Espelage et al., 2020; Rizzo et al., 2021). However, an understudied aspect of dating violence prevention is young people's perception and communication of risks associated with dating abuse in their communities. While it is crucial to broaden our understanding of dating violence risk perceptions among at-risk youth beyond merely counting risk factors, prior scholars have looked at violence risk perception with low-income African American youth (Reese, Vera, Thompson & Reyes, 2001). This approach has not been previously considered with rural youth. Therefore, our findings contribute to a nuanced understanding of how rural young males describe and navigate risk and protective factors of dating violence and precise identification of contextual risks and protective factors. By eliciting their perceptions of their risk for dating abuse victimization and perpetration in rural communities in a

male-only sample, this study echoes gender-transformative strategies recommended as a way to engage men and boys in violence prevention, ally formation, and the dismantling of rigid gender norms (Flood, 2019).

Rural Teen Dating Violence

Rural teens have about double the prevalence rate of physical dating abuse as their urban counterparts (Martz, Jameson & Page, 2016; Edwards, 2015; Marquart et al., 2007; McDonell, Ott & Mitchell, 2010; Sianko et al., 2019). TDV is more common among youth from racial and ethnic minorities who live in urban and economically depressed areas (Fedina et al., 2016). Similar prevalence has been discovered by other researchers in the rural-urban divide (Edwards, 2015). However, family stress theories suggest trauma-exposed rural youth (particularly those in small communities) contend with persistent poverty, youth disengagement, fragmented support services, high social cohesion (threatening confidentiality of services) (Martz, Jameson, & Page, 2016). Recent studies have found substantial variation in TDV rates across the US, with physical dating abuse as high as 13.7% in Tennessee and as low as 6% in South Dakota and Iowa (Basile et al., 2019). Still, rural youth remain understudied in the literature (Martz, Jameson, & Page, 2016; McDonell, Ott, & Mitchell, 2010; Vézina & Hébert, 2007).

The identified risk and protective factors in the TDV literature are not particularly relevant to rural youth. Rurality is compounded by the presence of a male abuser in the household, economic deprivation, geographical alienation, drug abuse, parental death or divorce, and social norms that tolerate abuse but punishes help-seeking (McCauley, Breslau, Saito, & Miller, 2015; McDonell et al., 2010). Furthermore, chronic family violence, a lack of specialized providers, non-confidential programs, and multiple marginalized identities increase the likelihood of TDV for rural youth and affect their ability to seek help (Martz, Jameson, & Page, 2016; Vézina & Hébert, 2007). These factors also have an effect on normative gender norms, which regulate violence disclosure and help-seeking in abused males (Emezue & Udmuangpia, 2020).

The Complexity of Communicating TDV Risk & Protection

Double standards exist in youth descriptions of TDV risk and protection. According to Murray & Azzinaro, 2019, “girls tend to describe behaviors as abusive if the *impact* is negative, whereas boys describe behaviors as abusive if the *intent* is negative.” (p. 29). In some cases, adolescents described TDV behaviors as abusive only with recurrence and physical harm (Murray & Azzinaro, 2019). Successful TDV prevention programs would be difficult to implement if young people continue to underestimate their risk of experiencing or perpetrating dating abuse.

The Relational Dialectical Theory (RDT; Baxter & Montgomery, 1996) was used in this research to describe rural youth narratives of risk and protective factors. Based on Mikhail Bakhtin's scholarship on dialogism, RDT portrays dialectical contradictions as competing needs expressed and mediated within relationships (Baxter & Montgomery, 1996). (1981). Contradictions are central to the dialectical theory and are described as "the dynamic interplay of united oppositions." Baxter and Montgomery's (1996) *autonomy-connectedness, openness-closedness, and novelty-predictability* are examples of common relationship contradiction clusters (Baxter & Montgomery, 1996). Dating abuse, on the other hand, is a time of heightened dialectical struggle marked by a breakdown in basic contact and communicative management practices. We contend that reflecting on youth risk narratives in this manner offers a complex but pragmatic perspective that has implications for planning, adapting, and implementing gender-transformative anti-TDV interventions.

The dialectical nature of dating violence is becoming more widely recognized, especially within rape culture. Dialectics are philosophical structures that describe opposing polar views while simultaneously negating yet valid realities (Baxter & Montgomery, 1996). The victim-perpetrator dialectic of sexual harassment (i.e., “he said – she said”), the victim-survivor dialectic (both with different connotations), and the victim-victimizer dialectic (the same individual being both victimized and an abuser) are examples of common dialectics of dating violence (Rasmussen, 2012).

Dialectics captures tensions in abusive relationships, understandings of violence dynamics, and social reactions to TD, in addition to having a pragmatic way of thinking about contact in dating relationships. The paradox of *danger* and *safety* in the same relationship is a significant quandary, particularly for young people new to dating relationships. The prevalence of sexual harassment and rape culture on college campuses, for example, can be due in part to some of these dialectical inconsistencies. For instance, scholars show dialectical inconsistencies in youth sexual consent narratives, such as *wanting* and *not wanting* sex, as observed in Muehlenhard and colleagues' (2016) research on token resistance. Youth discourse is often riddled with inconsistencies when it comes to negotiating sexual consent. In one study, college students perceived males as *sex initiators* and females as *sex gatekeepers*, levying strict sexual and gender roles that could lead to coercive consent negotiations and sexual aggression (Jozkowski & Peterson, 2013). These inaccurate perceptions often underlie language surrounding victim-blaming, rape myth acceptance, and violence minimization (Worthen & Wallace, 2017).

Baxter and Scharp (2016) advocate for expanding dialectical studies to culturally sensitive contexts of disadvantaged populations, where dialectical effects are poorly understood. Rural culture provides a unique opportunity to investigate dialectical tensions in youth narratives of dating violence vulnerability and protective factors. Several researchers have used relational dialectical theory to better explain relationship violence (Baker, 2001), workplace sexual assault (McGuire, Dougherty, & Atkinson, 2006), and online dating narratives (Fox, Osborn & Warber, 2014). Furthermore, qualitative interpretive practices are widely recommended by adolescent health researchers who advocate for a gender-aware approach to understanding TDV risk (McCauley et al., 2015). TDV experiences and help-seeking/help-giving behaviors may be influenced by adolescent and young adult perceptions of their exposure to dating abuse and the possibility of becoming violent themselves. These perceptions must be addressed in any successful TDV prevention work with young people, whether they appear as contradictions, confirmations, or paradoxes in youth narratives. As a result, focusing on risk communication and risk awareness is crucial to behavior

change for behavioral problems other than dating abuse, since risk conceptualization also encodes concepts, attitudes, and behaviors. Despite this, there is no evidence that rural dating abuse has been analyzed using a dialectical perspective.

The Current Study

The purpose of this study is to explore *how* rural young males dialectically describe their perceptions of TDV risk and protective factors in rural communities as investigated in two research questions (1) How do Rural Young Males perceive risk and protective factors for TDV in their communities? (2) What roles do gender and masculinity play in promoting (or protecting from) TDV among rural males?

Methods

Study Setting

This research conducted focus groups and individual semi-structured phone interviews with rural male youth (ages 15-24) throughout the United States using an online modality. The effect of age on peer culture, intergroup dynamics, risk-taking gaps, and self-identity led us to stratify all interviews by age group (15-17 and 18-24 years) (Arnett, 2006). Studies indicate that young males in male-only environments are more likely to focus on their own patriarchal and abusive experiences, as well as explore their own experiences as victims in this empathetic and counter-public space (Flood, 2018, p. 205).

Recruitment strategy

An IRB approval was received, and parental permission was waived by the IRB, as this research did not pose greater than minimal risk. Recruitment followed a purposive and convenience sampling strategy to recruit a more representative sample (Etikan, Musa, & Alkassim, 2016; Palinkas et al., 2015). Custom Facebook and Instagram ads were created, and flyers were emailed to two youth-serving organizations. The study was also advertised twice in a weekly campus bulletin in a large US Midwest university. Male- and sports-themed photos were used in Facebook and Instagram

ads to increase interest, provide a sense of belonging, and a call to action. Titled the Health-*e* BROS! Study: (Better and Healthy Relationship Outcomes), we described the study as “An Adolescent and Young Adult Health & Relationship Study.” On study materials, the words ‘dating violence’ was avoided not to problematize this topic or study. Ads directed participants to an online Qualtrics™ enrollment form. Social media ads were programmed to target rural US counties by zip codes. Participants completed brief online eligibility and 11-question demographic questionnaires. When enrolled, their zip codes were compared to the 2010 Rural-Urban Commuting Area (RUCA) codes to establish eligibility (US Department of Agriculture (2014). Eligible participants were then contacted via their preferred and safe contact method and scheduled to a focus group. Since interested participants resided in different time zones and had various time constraints, if a suitable time for a focus group could not be identified, an individual interview was scheduled. Ineligible participants were thanked and received no further study-related communication.

Eligible participants identified as male, 15-24-years old, having ever dated since age 13 (serious or casually dating), comfortable speaking and reading in English, with access to an internet-connected computer or phone, and living or schooling in a rural or medically underserved area or health provider shortage area (HPSA) – as established by RUCA codes. Past dating abuse history was not an eligibility criterion. While there is no maximum or minimum sample size in an interpretive study, participants were sampled until data saturation was achieved - a point where no new information was identified (Corbin & Strauss, 2008).

Study Procedures

Using open-ended and interpretive interviews (not distinguished by age group), three focus groups via videoconferencing and 13 individual phone interviews were conducted. The smallest focus groups had 3 participants, and the largest had seven. The PI is a Black immigrant male researcher in his thirties, conducted all interviews, established rapport with young rural males, and was familiar with youth-engaged research from previous work with adolescents and young adults. An information sheet clarified any concerns that parents/guardians may have had about the study.

Participants provided informed assent and consent and were informed the study was voluntary and confidential. Before each interview, participants watched or listened to two short video vignettes that contextualized discussions of TDV. The first video was of a young woman who was being physically abused (not explicitly shown) and psychologically abused by a male partner, using isolation, social media monitoring, and stalking tactics. The second video showed a young man being assaulted verbally and physically on school grounds by his girlfriend. At the end of each video, the National Dating Violence 24/7 text, phone, and live chat service number were displayed.

An open-ended interview guide was used with rural young males to examine perceived risks and protective factors for TDV. For all age groups, the same interview guide was used. Questions in focus group discussions and interviews focused on perceptions of risk and protective factors related to the rural context and gender and social norms. Each session lasted approximately 45 to just over 1 hour, and participants received a \$20 Amazon e-gift card for their time and expertise.

Data Analysis

All interviews were audio-recorded and transcribed verbatim by the first author and a paid transcriptionist resulting in 170 pages of transcription. Using a qualitative interpretive approach, we focused on meaning-making and dialectal tensions in rural youth narratives (Creswell, 1998). An interpretive approach kept the study pre-theoretical not to bias our interpretation (Lindlof, 1995). As a result, beyond simply listing risk and protective factors, we aimed for a more interpretive analysis of risk and protective factors of rural dating violence.

First, transcripts were read and re-read, sorted, and arranged to find emergent codes from three random transcripts. As a result, transcriptions were condensed into meaningful themes that were discussed in weekly team debriefing meetings comprising researchers with experience and extensive publications on partner violence, qualitative research, and communication theories. Following transcription, the first author coded the data using NVivo (QSR International, Release 1.3) and provided an initial coding structure and preliminary codes to the team, who then discussed areas of agreement and ambiguity and addressed predicted, negative, and even differential findings

(Creswell & Creswell, 2018). The team reviewed codes to interrogate participant narratives, converging on similar interpretations, thereby establishing ontological criticality (Glaser & Strauss, 1967). Our analysis concentrated on organizing themes within two main themes of *risk* and *protective* factors in this first stage of analytical coding. As the themes emerged, we observed recurrence, reiteration, and dynamism of unexpected dialectical tensions detected in participant narratives. Because dialectics emerged as a salient analytic category, a second-stage analytical process concentrated on dialectical tensions to examine contradictions, paradoxes, and dualisms. The research team eventually identified the Relational Dialectical Theory as a useful way to articulate the dialectical tensions around dating violence risk and protective factors with rural young males.

This two-stage approach contextualized dialectical inconsistencies in how rural male youth made sense of their world using an interpretive lens. Theme labels were selected to capture the essence of participant narratives while also reflecting dialectical qualities and heuristic value. Finally, the team decided on which quotes would best support each theme. Higher-order interpretations are presented after each theme to validate or contrast participant explanations. We also leveraged *reflexive bracketing* in two ways. In team meetings, we first explored our personal biases related to our past work and noise from established literature. Second, the first author kept a journal of reflective statements detailing methodological and analytic decisions taken during the research (Gearing, 2004; Ortlipp, 2008). The findings of our analysis are summarized in the section that follows. By only adding the participant's age to each quote, we could satisfy ethical demands for confidentiality.

Findings

Participant Characteristics

Our online Qualtrics™ enrollment started in August through November 2020, and 27 participants were interviewed (nine participants aged 15-17 and 18 aged 18-24). The youngest participant was 15 years old, and the oldest was 24 (the mean age for the total sample was 18 years).

Table 1. Participant Demographics

Characteristics	n	(%)
Age, years		
15-17	9	15
18-24	18	85
Race & Ethnicity		
White	21	81
Black or African American	1	2
Asian	4	14
American Indian or Alaska Native	1	2
Native Hawaiian or Other Pacific Islander	1	1
Other	1	3
Hispanic	3	8
Non-Hispanic	24	92
Education		
College	10	37
Pre-college	†NA	
US Regions		
Midwest	18	65
Northeast	4	15
South	3	12
West	2	8

†College information was extrapolated from the recruitment and interview data.

Overview of Themes

Our interpretive analysis identified two main themes of risk and protective factor dialectics: (1) *Dialectics of Social Tensions* and (2) *Dialectics of Help-Seeking & Help-Giving*. Within each main theme, constitutive sub-themes are described as dialectics and accompanied by participant quotes. Dialectical

tensions and contradictions were used as an interpretive heuristic framework for understanding rural male experiences with dating violence consistent with the study’s interpretive aim:

Table 2. Overview of Themes

Main themes	Sub-themes
Risk & Protection Dialectic of Social Tensions	<ol style="list-style-type: none"> 1. Language Matters: Abusive vs. Unhealthy Relationship Dialectic 2. <i>The #MeToo vs. #WeToo Dialectic of Victimhood</i> 3. Rural vs. Urban Masculinity Dialectic - “It’s All Country Boys.” 4. Present vs. Absent Father Dialectic
Risk & Protection Dialectic of Function	<ol style="list-style-type: none"> 5. Religion & Spirituality 6. Local Preachers 7. School Guidance Counselors 8. Peer Mentors

Risk & Protection: Dialectics of Social Tensions

Risk and protective factors have not been considered dialectically for rural youth in the dating violence literature in this way. Our analysis revealed latent dialectical tensions in *how* rural young males identify and communicate risk and protection, showing tensions, conflicts, and gaps between participants’ descriptions and social realities. Overall, participants characterized TDV risk factors dialectically, with some factors described as both promoting and preventing TDV.

Language Matters: Abusive vs. Unhealthy Relationship Dialectic

This subtheme refers to the ambiguity of language and meanings recognized in rural youth communication about what constitutes abusive and unhealthy relationships. The most noticeable tension expressed by rural youth was found in language describing *abusive vs. unhealthy relationships*. While all participants shared a collective opposition to dating violence, we observed contradictions in

subjective definitions revealed discursive tensions (i.e., mutually negating inconsistent propositions). This made us consider the consequence of language and words like “abusive” and “unhealthy” as key indicators of TDV risk perception. From a dialectical perspective, participants attached a higher severity to *abusive* relationships that they did not relate to *unhealthy* dating. Besides, they portrayed *unhealthy* relationships using risk-minimizing language and passive descriptors, as seen in the following quotes:

“One-sided, greed, bad communication. Probably dishonesty. And then also, I would say something down the lines of like, not being fully upfront or hiding stuff or yeah, stuff like that.” [17yo]

Further extending this risk-minimizing language, another participant commented:

“Honestly, it's like when someone is mistreating someone and kind of giving them no opportunity to leave, or if they have the opportunity to leave, they don't want to, because, for whatever reason, they're stuck with them. And it's just not a good situation for anyone.” [15yo]

Take note of how both speakers used risk-minimizing terms to characterize unhealthy behaviors as “dishonesty,” “hiding things,” “poor communication,” and “mistreating anyone.” Furthermore, from a dialogical perspective, the use of exclusionary language appeared to minimize the severity of these actions and characterizations of what constitutes an “unhealthy” relationship. These descriptors seemed insignificant at first glance until we asked, “So what comes to mind when you think of *abusive relationships*?” To this question, the same 15-year-old as in the quote above stated:

“Oh, there's like physical abuse, which is like hurting your significant other, and then there's psychological abuse where there may not be any physical bruises, but they get mentally torn apart by the relationship, even if they don't know or won't accept that it's happening.” [15yo].

Another participant commented:

“Things such as abuse, both physically and psychologically, especially psychologically not answering text messages, talking to other people, doing things that, you know, they'll think is not okay.” [18yo]

Note the active descriptors of “abusive” relationships in these participant quotes, with participants explicitly referring to physical and psychological abuse and behaviors. In this description by the same participant, consider the difference between “giving them no opportunity to leave” or “mistreating someone” and “mentally torn apart” or “physical bruises.” While these descriptors describe unhealthy and abusive contexts, his language varied in ways that went beyond semantics. The same variations were noted in other participant narratives. These language discrepancies established a dialectical tension that indicated a problematizing of risk communication. Within this dialectic relation between the risk of unhealthy and abusive relationships, we may locate potentially dissonant messaging in prevention work and how youth receive this message. This dialectical tension made us consider if and how language affected risk perception and demonstrable attitudes towards dating violence.

From a dialectical perspective, we also observed a parallel to Baxter and Scharp’s (2016) dialectic of *otherness*, when participants dialectically converged around prototypical forms of TDV (physical and psychological abuse) but narratively avoided more *severe* forms of TDV (e.g., rape and sexual assault). Participants rarely described sexual violence in their narratives of abuse. We observed this distancing language with misunderstood forms of TDV (e.g., online dating abuse). Only when asked, “what about sexual abuse?” or “what about forms of online abuse?” did participants include these abuse typologies in their narration. An interview with a 19-year-old demonstrated this dialectical convergence:

Participant [P]: When I hear like an abusive relationship, I automatically assume like physically abusive, not so much emotionally abusive, but I tend to think about like, you know, domestic abuse or, you know, sometimes like I guess, like marital abuse.

Researcher [R]: Okay. In terms of some of this coming to light, now that you in college, have you heard about other forms of abuse besides physical, emotional, for example, sexual abuse?

P: I would say no. Those are typically the only ones that I’ve heard about. I suppose mental abuse might fall under emotional abuse.

R: Have you heard about online abuse?

P: I have not.

This participant seemed unaware of abuse typologies beyond the prototypical physical and psychological abuse. The same level of narrative convergence and divergence seemed to show up in other participant narratives. Hamby (2017) suggests definitions of violence usually concentrate on physical and forceful actions, sparking debate about whether psychological or verbal attacks can be considered violence.

From a dialectical perspective, meanings in participant descriptions also seemed to diverge beyond language alone. In one dramatic example, some participants described one behavior as *abusive* while the same behavior was described as potentially *healthy*. Phone monitoring and social media password-sharing are trendy behaviors among adolescent dating partners (Lucero et al., 2014). However, this is also a popular online abuse tactic that encourages stalking and controlling behaviors (e.g., coercion and jealousy). However, some participants dialectically described password-sharing as both a *control tactic* and a *display of trust*, making this a clear example of a dialectical paradox due to tensions in how this behavior was interpreted (Putnam, Fairhurst & Banghart, 2016, p. 72). A focus group participant explained the problem with social media password-sharing:

“I think that's dependent on the couple itself - sharing passwords can kind of be like at some point, a breach of trust. Somethings should be kept private.” [Focus group, 18-24yo]

In contrast, another participant explained password-sharing as both a *healthy* and *unhealthy* behavior:

“I also think it's possible that [password-sharing] could be healthy, that there could be a case where both parties agree that they're just open that way and sharing phone passwords. So, it could be healthy. But if it's one-sided, then it's unhealthy.” [Focus group, 18-24yo].

The last two excerpts show how young males represented the same actions in vastly different ways setting up a dialectical ambivalence within the same focus group. To a degree, one participant

thought password sharing was okay if both partners in the relationship agreed to it. Another participant found password sharing to be unquestionably harmful. If this behavior was misunderstood, the consequences and red flags are likely to be misunderstood as well. In this liminal space, where youth do not recognize the signs of abuse, their help-seeking and help-giving attitudes, as well as their degree of violence tolerance, are all affected.

Baxter and Scharp (2016) argue that language and rhetoric are essential vehicles for conveying meanings and communicating behaviors. By analyzing descriptions and contradictions in behavior narratives, we gain rare insight into how rural youth communicate TDV risk (Muehlenhard et al., 2016). This is a crucial issue, as most school and community-based TDV prevention curricula and programs use gender-blind approaches and minimizing language that may misrepresent risky behaviors, sometimes due to the complexity of local and state policies (Tannenbaum, Greaves, & Graham, 2016). To characterize dating abuse, service providers have been known to use "complex language" and essentialist keywords such as "toxic," "aggressive," "violent," and "abusive" as well as agreeable words like "unhealthy" and "unsafe" (Taylor, Calkins, Xia & Dalla, 2017, pg. 13). These terms are theoretically indistinguishable and difficult to operationalize, particularly for young people new to dating. A participant criticized the language of dating violence prevention as discussed in his school assembly:

"When I was in high school, it wasn't a frequent discussion. I would say maybe once a year, we would have a counselor come in, and they would say, you know, "if anything were to be happening if you see anything" – and this is a very general talk – "Like, are you're getting abused by your parents? Or if you have a friend that's getting abused by their parents or abuse inside [school] clubs. Like are you getting hazed? Are you getting bullied by other players on the team you're on?" But they never directly said like "if you are being abused by a significant other, or know anyone that is abused, then this is a resource you can go to." [19yo]

This participant identified a clear difference in school-based dating violence prevention activities centered on ambiguous communication, where several violence exemplars were considered, such as

hazing, bullying, and domestic abuse. However, dating abuse seemed to be a secondary concern. As these quotes point out, where language and meanings are ambiguous, communication becomes problematic. This ambiguity could precede misunderstandings in TDV risk perception and affect how we design anti-TDV studies, survey instruments to measure dating violence, interpret results, and write policy guidelines; this ambiguity remains a source of contention even among researchers (Hamby, 2017).

The #MeToo vs. #WeToo: A Dialectic of Victimhood

The contemporary #MeToo and #WeToo movements are ancillary global social campaigns that have shed light on sexual assault and harassment in society by focusing on the same issues with different factions. This subtheme describes how a dialectical tension is established between female and male victimhood. Specifically, the greater societal support and growing believability for female survivors embedded in the #MeToo movement is dialectically juxtaposed with narratives of male victimhood depicting hidden, ignored, and neglected male victims.

On the one hand, in keeping with the majority discourse, most participants acknowledged a cultural shift in attitudes toward gender equality and issues like sexual consent. This awareness is in light of high-profile sexual assaults in the media institutionalized in the #MeToo movement, first devised as 'Me Too' by activist Tarana Burke in 2006, before becoming a social media campaign with the hashtag (Burke, 2018; Gibson et al., 2019). Though we expected this growing awareness to be narrated in dominant discourse as the *wrongness* of dating violence among rural youths, we did not expect the portrayal of male victimhood to be described as a marginal discourse sharing parallels with "Cancel Culture" and situated in the #MeToo movement. *Cancel Culture* refers to the social and public ostracization of society members for inappropriate acts, statements, or actions, which results in social and public retribution and rejection expressed in exclusion from social or professional groups online or in person. In this way, several high-profile men have been *canceled* following their exposed acts of sexual abuse and harassment. Though contentious and not capturing the majority experience, this emergent marginal discourse resisted dominant cultural ideologies when a participant spontaneously

presented this *canceling* perspective. We argue that this vital differential finding warrants inclusion in our interpretation of TDV risk communication given the dialectical consequence of this counter-discourse as seen in this participant's explanation:

"I think it would not occur to most guys that there is even any type of support from the men who are the victims of abusive relationships. Because all of this [Me Too] stuff has said men are the abusers, men are the abusers, men never will get abused. It is not politically correct to say men are abused. In many colleges, if you say that men are abused, then you'll get *anceled*, trust me. Do you know what canceling is?" [20yo].

This participant pointed to a widely held perception that being *male*, and a *victim* was an anomaly as society considered male victimhood a departure from societal expectations. The position of hegemonic masculinity, reinforced in society, culturally conditioning men to remain unvictimized and brutal (Connell & Messerschmidt, 2005), facilitating the erasure of male victimhood in social discourse and gender activism with real implications. This participant narrated a struggle between two opposing dialectical social processes, *skepticism* and *believability*, based on the assumption of victimhood – or who counts as a victim linked to binary gender. This dialectical tension was distinct from the self-sufficiency narratives and macho posturing that dominated male narratives in our previous work with men, whether as victims or perpetrators (Emezue & Udmuangpia, 2020).

Paradoxically, this assertion to male victim *skepticism* and *canceling* mirrored patriarchal silencing strategies used to suppress female survivors, to minimize their experiences, even today. In the hermeneutic spirit of interpretive analysis, our interviews left us wondering if this counter-discourse was widespread among victimized young males who felt marginalized, discredited, and silenced or, in the least, an evolving concern. Such as was found with Black and Brown women felt ignored within the early women's rights movements and then in the contemporary #MeToo movement that centered on well-resourced cisgender white women. This sense of marginalization inspired the #WeToo campaign as a solidarity movement to the #MeToo social action (Hasunuma & Shin, 2019). The #WeToo arm sought to include *othered* and disenfranchised groups, including Asian

American women (Roshanravan, 2021), Trans and non-binary people, Black and Indigenous People of Color (BIPOC) (Johnson & Renderos 2020), as well as working-class women in South Korea, China, and Japan marginalized in secular Western movements (Hasunuma & Shin, 2019). We located this counter-discourse of marginalized masculinity within this alternate movement, reflecting the dialectal tension seen in the #MeToo vs. #WeToo dialectic. Both campaigns recognized the inclusion of the excluded—however, those who were included varied.

The same participant went on to describe his frustration with the social exclusion of male victims:

“I think if a guy may have publicly stated, “I have been abused,” that would not be seen as credible and that he would be treated as though he was lying. And I if a guy who hasn’t been abused says “men get abused, too” then he is *canceled*.” [20yo].

This excerpt exemplified the conflicting emotions and internalized challenges that some males with a history of violence undergo as both the source and the target of social contradiction. The implicit assumption being that sexually assaulted men faced a “disclosure–privacy contradiction” (a type of *contradiction of expression*, see Baxter & Scharp, 2016, p. 3). This contradiction dictated whether they disclosed their violence, how they disclosed it, and to whom. As other scholars have found, this contradiction dictated the claim to victimhood. We wondered if this presumed invisibility shared any dialectical links to the thinly veiled cynicism among those who endorsed patriarchal gender beliefs. There is evidence of this form of language encoding sexist attitudes against women and the growing anti-feminist movement, as seen in male supremacist manifestos and online misogyny factions. These groups centralize the “women can be violent too” narrative, thus creating dialectical dualisms that undermine efforts to reduce violence against women (Bratich & Banet-Weiser, 2019). On the other hand, this form of dialectical tension has been used to critique dominant voices by the marginalized; thus, contradictions can be constructive (Baxter, 2004; Baxter & Montgomery, 1996)—this #MeToo vs. #WeToo dialectic warrants further investigation. In the next subtheme, we further explored the socio-cultural influences of gender discourse on masculinity expressions.

Rural vs. Urban Masculinity Dialectic - "It's All Country Boys."

This subtheme focused on socio-cultural influences on dating violence risk, emphasizing rural vs. urban masculinities and how these masculine sites and distinct masculine positions encouraged or shielded from TDV (Brandth, 2016). A dualism emerged, dividing our participants into two discursive groups. One group took pride in their cisgender masculine identity. Still, they recognized that rural masculinity promoted female subordination and cis-heteropatriarchal male dominance, which resulted in partner abuse or, at the very least, a tolerant atmosphere for conflict. The second group saw this heteropatriarchal perspective as stereotyping rural men, resulting in a dialectical tension over how rural masculinity was defined in relation to fatherhood and fathering practices.

In support of the first group, a young man stated: *"It's all country boys, it's a different culture than in the city, maybe in the city they would, but in the country, it's kind of like, just like macho, like you know."* [18yo]. This participant contrasted rural and urban masculinities as two distinct masculine positions, thus establishing a dialectical tension. Another participant characterized rural masculine identity as a learned behavior with embedded cultural scripts manifested in social and gendered roles:

"As guys, we're kind of raised to be like, "Oh, you just man up and get over it." Do you know what I'm saying? But like, girls are like a lot more encouraged to speak up about it." [Focus group, 15-17yo].

As this participant vividly noted, gender role socialization appeared to be predictive of relationship conflict and aggression, or at the very least, shaped the conditions in which partner conflict and dialectical tensions were likely to occur. Another participant further established rural masculine identity as negotiating socially defined gender roles from agrarian masculinity:

"In rural communities more than other communities, the male is definitely the dominant one, because kind of the paradigm is it's the male who goes out to the field, he feeds the cows, does all the tractor work while the female, you know, stays at home and keeps things going there. Not that it's exclusively that way, but that definitely happens much more than the reverse. I think it sort of makes the woman in the relationship have a greater sense of helplessness - if that's the right word? - because if the man

is controlling all the money because he's the breadwinner, then he can, you know, put ridiculous sanctions on the woman...which could potentially lead to more physical abuse or things of that nature." [19yo]

This quote demonstrates how representations of rural masculinity (re)produced hegemonic normative norms and gendered roles that emphasized rural men as providers who were also self-sustaining, emotionally repressed, and privileged due to their control over household power (i.e., husband leadership), financial activity, decision-making, and social status. This hegemonic stance influenced how young rural males understood and processed their patriarchal positions and significantly influenced help-seeking behaviors - characterized as feminine in Western culture (Hiebert et al., 2018).

However, the second group of participants saw this heteropatriarchal and agrarian masculinity stance as stereotyping rural men, setting up a polemic interplay in discourse. Polemic interplay depicts competitions for dominance within an utterance (Baxter, 2011). Resisting the macho "Country Boy" narrative, a 19-year-old commented, "I think that stereotype is just a touch overdone for rural communities." This second group instead juxtaposed rural and urban masculinities, defining both as constitutive but distinct contexts in which dating violence could just as easily occur. The same participant tried to explain this constitutive contrast in rural and urban masculinities:

"I suppose this is stereotyping a little bit, but very much so, families are not split up in rural towns like they are in urban areas. Usually, I mean, the pattern is that you have a father and a mother and children." [19yo]

Note how this participant resisted the essentialist stereotyping of rural maleness by defining *intactness* within rural families as proof of *good* masculinity. In opposing a stereotype, this participant (re)produced another popular and essentialist stereotype of family brokenness in urban areas. In another dramatic example, a participant problematized urban masculinity by describing essentialist scenarios of chaos and violence that characterize urban life:

“Oh, yes, absolutely. I believe that at least from what the media tends to show, or at least the media that I consume, the masculinity issues that I tend to find, they are either fights, tends to be violent instances where you see the clashes of masculinity, you see gunfights, you see like physical fights or riots or gang violence. And I do think that's very different in like growing up in a rural area. There's not as much tension, I believe... That sense of having to prove yourself might not really exist in a rural area. There's definitely still clashes of masculinity presented as violence, but it's not as frequent, and it's not as intense.” [19yo]

This participant is interrogating urban masculinity by describing “clashes of masculinity” manifested in chaotic and violent vignettes that defined urban but not rural cultures. In this process, both groups, one decrying rural masculinity and the other extolling its virtues, constructed a dualistic social position of at least two meanings of rural masculinity, as well as a polarity of rural vs. urban masculinity. These two ontological variants revealed the continuing struggle between rural and urban masculinities debated in other studies (Brandth, 2016; Hiebert et al., 2018). It is worth noting that masculinity is both non-static and non-monolithic. Even in rural culture, fathering and masculine values are fluid and changing, even as rural fathers and sons negotiate aspects of masculinity that should remain unchanged (Hiebert et al., 2018). Men continue to perform their masculinity in relation to internal and external social factors (Brandth, 2016). We argue that where rural or urban males believe that their version of masculinity is impervious to change (i.e., monologic or unbending masculinity, see Hiebert et al., 2018), this perception is engrained in social norms that regulate male characterization, attitudes, and behaviors toward partners and dating violence. Given this, the extent to which dialectics of rural vs. urban masculinities influence attitudes towards dating violence is a paramount concern that is considered in the following theme.

Present vs. Absent Father Dialectic

The paternal role of nonviolent rural fathers' involvement in their sons' behavioral and socio-emotional growth is well known but remains an underappreciated preventive factor against dating abuse. Scholars have researched male/father-figure and son relationships to understand better how

masculine norms in familial relationships influence emotional well-being (Kesebonye & Amone-P'Olak, 2020) and primary socialization to dating violence (Rizzo et al., 2021). However, few studies consider fatherhood in rural contexts (Brandth, 2015). We observed a *present-absent father* dialectic when participants narrated a tendency for urban fathers to be *absent* in their sons' lives, thus unable to bond, as seen with rural father-son dyads. Thus, rural father-son bonding was described as protective against TDV victimization and perpetration. In a clear illustration, a participant used the stereotype of urban fathers as *absent* fathers to highlight the prominence of rural father-son relationships:

“In a rural community, at least until school age and during the summers, the son is always with the father, and the father always comes home and eats lunch and dinner. I feel like that relationship is much, much, much stronger in rural communities than in urban communities. I feel like because of that relationship being stronger, the father has a greater understanding of where [his] son is coming from and what’s going on. The worry that rural fathers are not understanding because he has a “big macho man mentality,” in some cases, is true. But in the vast majority, I would say probably not for the rural community.” [19yo]

This participant described rural masculinity by contextualizing his narrative (and stereotype) against urban masculinity, with fatherhood and fathering practices being the measure of masculinity, literally and figuratively. This participant revived a long-standing trope of the “disappearing father” in twentieth-century America by implying that rural fathers were more likely to be present-fathers, given wider social shifts that increased labor force participation and longer commutes to work, divorce rates, and non-traditional family structures (Brandth, 2015). Besides, this participant identified two perspectives of masculinity or “clashes of masculinity” distinguished as opposing polarities between rural and urban fathering practices (Baxter & Montgomery, 1998). For some participants, rural father-son bonding centered around routine farming activities:

“One thing with rural communities, especially farming communities like the one I grew up in, is the father and son bond is much, much, much tighter than in say an urban community because ever since the son has been knee-high to a grasshopper, if you can call it that, they have always been out in the

field working with their dad, whether that's, checking the cows, bringing the corn in, they're constantly working with their dad, and they're with their dad so much more in the rural communities than in an urban...The father has a greater understanding of where the son is coming from." [19yo]

This quote notes how father-son activities became the forum for parental bonding, socialization to masculinity, the acquisition of skill needed for continuing the family legacy, contributing to the household, and primary socialization. Although not universal and potentially overstated, most rural young males in our sample seemed to favor problem-solving relationships with fathers, implying that fathers were in a better position to understand their situation and offer advice "from a male perspective," even as fathers tended to construct their own identities as fathers in this space (Brandth, 2015). Avenues for positive parental intervention in TDV are unexplored with rural youth. Besides, parents may lack the requisite emotional, cognitive, and pragmatic skills to intervene successfully in highly sensitive adolescent health behavior issues (Black et al., 2008a; Hedge, Sianko, et al., 2017). Requisite parental skills such as emotional support (warmth and empathy) and instrumental support (e.g., referral to trusted care) may be challenging to learn and use without effective parent-child communication (Ashley & Foshee, 2005).

Overall, it was clear that parental problem-solving with male/father-figures helped rural males positively ruminate with a trusted adult within the framework of family functioning. This is a critical socialization and emotional development process. Father-son bonding, when positive and warm, can influence the socialization of males to gender roles, nonviolence, respect for women, and even positive bystander behaviors. Parent-teen dyads suggest open communication is a preferred strategy for preventing and responding to TDV (Black & Preble, 2016; Rothman et al., 2011). Compelling evidence now exists to show that irrespective of setting, adolescents often solicit parental involvement so long as they find this process to be helpful and pragmatic, particularly where they perceive that parental styles are balanced (i.e., supportive, warm, and comforting) (Black & Preble, 2016). Nevertheless, it is worth noting that the notion of fathers-as-a-resource favors *intact*, romanticized, two-parent heterosexual households – a privilege for some.

Risk & Protection: Dialectics of Help-Seeking & Help-Giving

Within this theme, we grouped ontological dualisms and discursive competition in how participants described informal help-seeking agents and help-giving intentions in their contextual environment. These help-seeking agents played polar roles as “*unified opposites*” (Baxter & Montgomery, 2000, p. 32). The risk and protection *dialectics* of *help-seeking* broadly describe informal help-seeking processes and agents that simultaneously prevented and promoted TDV risk, or at a minimum, played functional roles that oscillated between risk and protection. In the analysis that follows, participants spontaneously described how *Individual-level* factors such as religion and spirituality, social status and wealth, and *interpersonal-level* social agents such as school guidance counselors, friends, and peers oscillated between risk and protective dialectics in their practical functions.

Religion & Spirituality

Rural males narrated how religion and spirituality were embedded in rural life and shaped rural masculinity and femininity. One participant enthusiastically illustrated the significance of religion: “Probably 80% of people, [me] included, were church-going every single Sunday unless you’re sick or you had some other big thing going on.” In this way, religion and spirituality seemed central to daily life and identity, especially Christianity. From a dialectical perspective, being religious served a protective function in societies where religious beliefs governed intra- and interpersonal conduct but sustained tropes of male supremacy and rural hegemonic masculinity based on religious conservatism that promoted a traditional understanding of gender within families. One participant exemplified this dialectical paradox created by rural religious conservatism:

“I think that religion could work both ways. In some ways, you could be seen as using religion as a justification for what you're doing abuse-wise. But in other cases, you could be like, “Oh, my good behavior stems from my religion. This is why I would never abuse my partner.” So yeah, I think it typically goes in a good way, but I can see it being used for either.” [Focus group, 18-24yo]

By presenting religion as both a justification for abuse and a deterrent to partner violence, this participant created a dialectical paradox. Primarily, strong religious beliefs were described as a rural

asset, and at the same time, a risk factor that mitigated TDV risk exposure. From a dialectical perspective, participants saw religion and spirituality as playing harm–benefit functions, sometimes with gendered effects. Another participant, for example, described how prescribed religious codes governed interpersonal relationships and gender roles:

“I went to the Methodist church, I have friends that were in the Catholic church or the Nazarene, and they were all against abusive relationships. I feel like a lot of guys joke about like women should submit to them, but I think it was just a big joke. In their relationships, they never acted like that. So, I think religion made it, so they were less abusive in relationships.” [18yo]

Note how although described as “a big joke” among his friends, this participant touched on the impact of religious statutes like ‘women submitting to their husbands’ was regarded as a conventional but elective religious practice. Still, this possibility created a subordinate power disparity between partners, potentially leading to conflict. Beyond the relationship, participants narrated the salient impact of partner violence on family reputation, as viewed by the church:

“I really think that one of the big factors as far as negating abuse is that there’s always church on Sunday morning - I’ve never looked into the statistics - but I would assume that some of the bigger days for abuse, at least physically, would be Friday night and Saturday night. Now, I don’t think that you would be as likely to physically abuse someone if you plan to get up and go to church where you’re gonna be around all the community in the morning.” [19yo]

Here, this participant explained how small-town credibility and identity management are a deterrent for partner violence. Overall, from a dialectical perspective, aspects of religion were protective, stressing compassion towards others, and positive peer reinforcement that discouraged violence of any kind. In contrast, other elements promoted the subjugation of women and the moralizing of male supremacy. These contradictory viewpoints are reaffirmed by studies showing strong adherence to religion encouraged female subservience, power differentials between partners, and strict traditional gender roles that exacerbated partner violence (Emezue, Williams & Bloom, 2019). In fact, abusive men have cited religious texts as justifications for abuse (Hancock & Siu, 2009). For those

who are victims of abuse, scholars describe ideals of trauma fatalism (destiny dictated by God) as an attribute of rural life, contributing to an aversion to help-seeking, making religion a more viable but potentially detrimental help-seeking alternative (Maercker, Ben-Ezra, Esparza & Augsburger, 2019).

Local Preachers

Linked to the influence of religion is the inclination of religious devotees to locate their help-seeking within religious contexts. In discussions, participants identified local church pastors as an “overlooked” and underutilized help-giving resource against dating violence. One participant explained:

“Pastors probably spend, at least in rural communities and I think probably in urban areas too, spend much of their time dealing with various problems between the members of the church, whether that’s marriage counseling, abuse counseling, or just giving general advice to someone. Pastors really are very big. I think you called it a social resource. I think one of the most overlooked responsibilities of a pastor is to be a counselor and to bridge disagreements and whatever problems the members might have.” [17yo].

According to this participant's description, the pastor played prominent help-giving roles beyond their church obligations. Pastors tended to take on a plethora of responsibilities, demonstrating the demand for this type of resource and its significance to the community. Here, this participant described the local pastor as filling a void in the delivery of support services. In this way, local clergy or preachers served as unintended dispute managers, confidants, and service providers. While the protective effects of religion and spirituality were not unexpected, as seen in previous narratives on religion and spirituality, we identified a vibrant dialectical contradiction where rural young males saw local clergy as a valuable help-giving resource but narrated religion and spirituality as vacillating between risk and protection, as seen in this participant’s comment:

“There is some chance that word gets out among the community, but it’s much, much less than if you would go to the guidance counselor. Because if you go to the guidance counselor, then everyone’s gonna know, that’s a given. So, the pastor, I suppose he kind of bridged the gap in that way.” [19yo].

Despite this participant's suggestion that local church pastors be used as a last resort, even favoring the pastor to the school guidance counselor, he seemed to illustrate a potential threat to confidentiality from discussing a sensitive topic such as dating abuse with the local pastor.

Participants described preachers as providing a listening ear and instructional guidance on negotiating significant problems like dysfunctional relationships. However, from a dialectical perspective, some participants worried that while filling a critical void in a resource-constrained setting, seeking this form of support could expose teenagers to stigmatizing comments and even punitive measures if their abuse were disclosed beyond the clergy. Considering their age group and given the socio-historical precedence of religious conservatism to favor conventionalism, sexual restraint, and purity, merely dating outside of marriage could be seen as morally reprehensible and frowned upon by leaders and members of religious denominations, rendering this form of help-seeking potentially risky. Nevertheless, this paradox was rich.

School Guidance Counselors

School counselors trained in child and adolescent development and play a vital role in the school ecosystem and in the lives of students by providing critical social and emotional resources such as academic support, skill-building, trauma, and mental health support, among other services. However, we noticed that participants disproportionately rated school guidance counselors negatively, in some instances, as a problematic resource to have. One participant narrated the social stigma associated with help-seeking through school counselors:

“I don’t know of any guy that ever went to the counselor because we’re such a small school that everyone knows if someone goes to the counselor with a problem, not because the counselor is irresponsible and doesn’t take confidential things confidential. It’s just that everyone sees someone walking into the counselor’s office. They’re like, “Oh, that person’s going to counseling. They must have some sort of problem.” [17yo].

Note how this participant substantiated the stigma and indiscretion with using school guidance counselors when help-seeking, implying that while the school counselor’s proficiency was not in

question, the use of this service was problematic. The lack of anonymity and confidential counseling services, as perceived by our participants, seemed to be a major concern in small rural communities where “everyone knew everyone.” Not only was this form of social support stigmatized and possibly avoided by those at risk or experiencing dating violence, the practice of using school counseling, intended to be a source of safety and support, was construed as a risk factor, given the damage to their reputation (a critical social capital for this age group) when publicly seeking support. Thus, the school counselors' role was situated within a dialectical contradiction of function or *dialectic of function*. School guidance counselors instituted to protect against destructive behaviors such as TDV were also construed as creating risk. In addition, a focus group participant mentioned the high student-to-school-counselor ratios in the public school system:

“I've had lots of bad experiences with school counselors. Like I've had one good school counselor, but besides that, they are not a very good mental health support system. And for me, it's kind of the reverse. So, for one year, I went to this small private magnet school, and they're like, the counselor was really nice. Meanwhile, at the public school I go to now, like the counselor there, it's kind of like she sees so many people. Like, you don't really get to talk to her.” [Focus group, 15-17yo]

This participant expressed frustration with previous interactions with school counselors, remembering this as a “bad experience.” However, this dissatisfaction was related to the availability of this essential service, particularly in low-income public schools compared to resource-rich districts. Although school guidance counselors were widely recognized as valuable resources in the school system, it would seem, though, that our participants did not favor them in this way. Not only did they describe going to a school counselor as a stigmatized behavior, but under-resourced school counselors in underfunded schools were also identified as a critical problem by some participants.

Peer Mentors & Social Cohesion

Interestingly, participants discussed the use of school advisory groups made up of student role models or senior peers as a resource that helped them find the guidance and assistance they needed,

even with relationship issues. Given the high social cohesion of rural communities and accompanying structural issues, ruminating with a peer was not only a pragmatic and useful resource but mitigated some of the concerns we have discussed. Here is an excerpt of a conversation with a 17-year-old describing student role models as an asset and potential protective factor:

Participant [P]: We have a school counselor, obviously, but we also have an advisory group. We have student mentors who are there to talk to us about our problems or to refer us to help hotlines for other websites for all that kind of stuff.

Researcher [R]: Okay. So, these mentors, are they people older than you or a class above you, or how does that work?

P: Well, it depends. Being a senior, all the senior mentors are seniors, so they help the freshmen and the sophomore and the juniors, too, but they're just there to generally be a friend and a guide for all the students in general.

R: Okay. And would it be pushing the line if someone talks to them about an abusive relationship, or would that be...?

P: No, they actually ask us about that pretty much every week in advisory. They ask us all how we're doing if we're stressed out about anything if we have any major updates we need to make.

Noted in this quote were the complexities of finding assistance and navigating social support.

According to this participant, fellow students seemed to fill a void in providing help for their peers, offering both material and emotional support for a wide range of problems, including, if necessary, dating violence.

In addition, rural young males described how behaviors, attitudes, and psychosocial wellbeing could be shaped "for good or bad" by friendships and peer groups. In this way, peer networks conferred known protective effects, as teens preferred peers and other informal sources (e.g., online support) for support and avenues to co-ruminate (Banyard, Moynihan, Walsh, Cohn, & Ward, 2010). Some

participants explained how they navigated relationships issues with members of their social covey in the community:

“There’s only about 40 people in my, or 60, no, 40 people in my class total, so all the guys have been really close since the very beginning of school, since like kindergarten. So, any problem comes up, we all talk about it. The lunchroom is basically just a group therapy session for most of us, I guess.”

This participant, like most youth, related to the use of his social network as both a reliable and trusted form of support. In describing the lunchroom as “basically just a group therapy session,” it was obvious there were therapizing qualities to this type of peer relationship. Peer networks are considered a vital part of adolescent “social convoys” – representing “a network of relations that moved with the person through life, changing in structure but providing continuity in the exchange of support” (Levitt, 2005. p. 38). Levitt (2005) suggests that the quality of adolescents’ social relationships bears implications for how they seek and use support from their social convoy.

Leveraging peer for social support presented a dialectic of function, where peers were a key social support but potentially socialized to the same attitudes and behaviors regarding TDV, making it likely they shared similar norms or were likely ill-equipped to help. An example of this dialectic of function is seen in this participant’s quote on his friend’s group:

“To be quite honest with you, this depends on what your friend group would really look like. If you’re seeking help and it’s been well documented, if you’re getting hurt in some way or another and everyone knows about it, then the friend [unclear] would be supportive. Still, more often than not, it’s very much a macho man mentality as far as friends go. Saying we’re tough, and we don’t want anyone to mess with us. I feel like that is especially relevant in rural communities. We rule the school, and no one’s gonna mess with us, and the principal sucks (laughs), and all the rest that you can throw into that. As far as, you know, physical strength or just even emotional really, if you’re in a group like that and all the other friends say “Well, you can’t be in our group anymore because you have this problem and you make the group look weak.” [19yo]

Peer networks confer known protective effects. Teens turn to peers-as-bystanders and other informal sources (e.g., online support) or co-ruminate with their social convoy members (Banyard, Moynihan, Walsh, Cohn, & Ward, 2010; Ehrenreich & Underwood, 2016). Co-rumination or “negative dwelling” is a peculiar coping and help-seeking strategy among youth, comprising “extensively discussing, rehashing, and speculating about problems, and focusing on negative feelings” (Waller & Rose, 2013, p. 2). According to scholars, peer responders were often unable to support or even disclose abusive activities because they were unaware of the red flags of TDV themselves (Hedge et al., 2017).

Being able to reach out to peers for material and emotional support was described as a culturally relevant and helpful source of assistance, particularly in resource-limited settings. A healthy level of community well-being is intricately related to adolescents' emotional and behavioral expressions, given the high degree of community integration that is common in rural communities. As a result, social solidarity is a well-known neighborhood-level protective factor against dating abuse and other predatory and criminal behaviors (Lee, 2000). However, where “everybody knows everybody,” we argue that despite the advantages, high community cohesion could be disadvantageous, particularly in small rural communities where teenagers attend the same schools and belong to the same social circles, “everybody knows everybody.” Thus, high social cohesion offered another dialectical tension in how this resource was described to hinder confidential abuse disclosure and help-seeking intent with potentially damaging outcomes. There is a dialectical disparity here, as community cohesion serves as a protective factor while also having the potential to intensify TDV risk.

Discussion

Using a meaning-making and relational dialectical approach, our findings showed a disconnect between participants' narrated attitudes, socio-cultural values, and perspectives on rural dating abuse. This reality gives urgency to understanding current attitudes to TDV, bystander behavior, and help-seeking experiencing among rural youth embedded in a uniquely understudied social context. This qualitative interpretive study contributes to current evidence of dating violence risk and safety factors in young rural males' narratives.

Language and meanings are essential mechanisms for transmitting attitudes and behavior. Thus, by analyzing variations in TDV behavior and risk narratives, we were able to gain a unique insight into how the youth communicate and perceive their TDV risk and protection, uncovering intriguing and essential issues for follow-up research and prevention work. Instead of imposing risk factors, we argue for a research agenda that explores and responds to TDV risk within a dialectical framework. Prior scholars have looked at violence risk perception with low-income African American youth (Reese, Vera, Thompson & Reyes, 2001). To our knowledge, this approach has not been previously considered with rural youth. Therefore, our findings contribute to a nuanced understanding of how rural young males describe and navigate risk and protective factors of dating violence.

Our findings indicate that risk and protective factors are multifactorial and complex and reflect the tensions of personal, local, and political dialectics in a rapidly evolving gender climate. For example, the #MeToo vs. #WeToo dialectic reflected dialectal and material tensions in how males described social identities as *victims* and *males* in male victimhood narratives, presenting male victims as ignored and stigmatized. A similar dialectic is set up in the contemporary #BlackLivesMatter vs. #AllLivesMatter movements. Both things can be true at the same time while negating and simultaneously interdependent. Given these dialectal conflicts, often with real implications, any meaningful attempt to prevent or reduce TDV among youth must wrestle with these tensions in youth perceptions of risk and protection. Ongoing developmentally and culturally appropriate anti-

TDV efforts must clearly understand the tensions between dialectics, intention, and actual behavior. This approach will support formulating new arrangements of risk – a dynamic aspect of interpersonal relationships - beyond only counting stable and contextual risk factors found with quantitative studies using survey formats to understand relationship dynamics.

Age, socioeconomic status, rurality, gender identities, peer pressure, and social norms are only a few critical considerations for intervention planning. Examining risk and protective factors in this way may help improve risk-informed interventions and develop community-relevant programs that activate resources that rural youth have identified as helpful (De Koker et al., 2014). Putting the focus on cross-cutting prevention should be the intent of sustainable anti-TDV interventions, as TDV co-occurs with a menu of issues.

Researchers and community advocates working in school settings perpetuate some of these dialectical tensions. For example, one study discovered that anti-TDV prevention programs encouraged females to avoid victimization as if it were their option. In addition, parents and school officials worry about the harsh reality of openly discussing sexual violence and rape with middle and high school youth (Allnock & Atkinson, 2019), and so mischaracterize TDV as “kids being kids” or physical violence as “boys being boys” or as “horseplay” (Pensak, 2015). Language and rhetoric are symbolic dialectical elements that contextualize youth experiences and risk perception of TDV and meaningfully inform risk communication in anti-TDV programs (Taylor et al., 2017). Interestingly, a prior qualitative study of youth perception of TDV shows that despite these mischaracterizations, young people continue to prefer clear, unmistakable descriptions of violence in prevention narratives (Taylor et al., 2017). We join prior studies to advocate for more serious consideration of language, context, and descriptors when creating or adapting anti-TDV messaging for youth.

The role of rural fathers in the behavioral and emotional growth of their sons is an underappreciated protective factor against dating violence and violence against women. However, rural men are regarded as heteropatriarchal. Arguably, this stance was not pervasive in our study. Positive

intrafamilial support is vital for the biopsychosocial well-being of adolescents experiencing unhealthy dating. However, parental roles as part of a *whole-family* strategy for preventing TDV are not well characterized among rural families.

Avenues to refine risk communication, such as at home and in school settings, are unexplored through a dialectical lens mainly because some forms of TDV are challenging to identify, and forms of abuse (i.e., rape and sexual assault) are harder to disclose or discuss. Besides, parents and school officials may lack the requisite emotional, cognitive, and pragmatic skills to intervene successfully in highly sensitive adolescent risky behaviors (Draugedalen, 2020; Hedge, Sianko, et al., 2017). Besides, requisite parental skills such as emotional support (e.g., warmth, empathy, and encouragement), informational support, and instrumental support (e.g., referral to trusted care) may be challenging to use without effective parent-child communication (Ashley & Foshee, 2005). The dialectal discrepancies identified here point to a broader need for recognizing, communicating, and understanding risk and protective factors. Notably, these dialectal differences provide insight beyond listing risk and protective factors to pursuing a more progressively interpretative framework to investigate nuanced risk and protective factors of dating violence in rural communities. Our findings bear implications for advocates and practitioners working with rural youth in planning developmentally and culturally appropriate anti-TDV programs and will yield intervention, policy, and for researchers by providing a broader framework for developing theory and effective violence prevention practice in low-income, rural contexts.

Strengths, limitations, and implications of the present study

There were limitations to this study. Our sample was predominantly White (81%) and from the Midwest and may not reflect rural minority youth experiences, challenges, and complexities with TDV. Furthermore, rural communities are heterogeneous, making generalization difficult. Moreover, Black, Asian American, Indigenous, and Hispanic young men draw from different ethno-racial schemas of masculinity, requiring focused attempts to reach these marginalized groups (Dworkin, 2015). Participants also seemed to come from two-parent middle-class homes, potentially affecting

the study's generalizability to low-income, single-parent groups. Furthermore, participants self-selected as we used a non-random sampling framework, possibly introducing a bias for those willing and able to participate in an online study. Finally, though we approached thematic saturation and presented significant and specific risk and protective factors, a more nuanced study design inviting those who completed the focus group discussions to in-depth individual interviews would have strengthened our results. Due to the online nature of our data collection during a global pandemic, it was challenging to coordinate participant schedules and encourage group diversity to allow for both dissent and congruence.

Dating violence risk and protective factors are multifactorial and complex, as established in our research. However, rural youth perceptions of risk and safety provide a complex and unusual perspective with possible implications (and consequences) for designing, adapting, and implementing anti-TDV programs in rural areas. If rural youth cannot communicate risk or misrepresent forms and contexts of dating violence, how useful are single-agenda, gender-blind dating violence curricula for mitigating their risk? We argue that these dialectically articulated risk and protective factors are crucial in designing programs to encourage abuse disclosure, help-seeking, and even positive bystander behaviors. We have provided opportunities for exploiting an already scarce resource: *rural male voice* by mapping perceived risk and protective factors that encourage or prevent TDV among rural youth. Applying gender-transformative techniques that include males as allies, promoting pro-social thinking, and incorporating dialectical perceptions of risk is crucial for contextually appropriate programs for nonviolent and healthy relationships. Rural-located programs must capitalize on existing rural assets, strengths, and resources that youth possess and build on them by creating sustainable solutions to dating abuse and co-occurring issues. We advocate for a multi-dimensional model to communicating TDV risk in anti-TDV messaging. Lastly, future studies may use in-depth interviews to understand culture- and gender-sensitive rural youth awareness of, and reactions to, some of the dialectical oppositions we have identified, mainly through narrative analysis or critical discourse analysis of participant stories.

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Chapter V

Rural Young Males' Acceptability & Readiness to use Technology-based Interventions for Dating Violence: A Qualitative Description Sub-Study

Abstract

Background: In 2019, 1 in 8 middle-to-high school youth will experience teen dating violence (TDV) in the form of physical, psychological, sexual violence, school and online cyberbullying, making early prevention an urgent need. Rural youth report nearly twice the prevalence rate of TDV than urban youth but remain understudied in the dating violence literature. Missing this literature are rural male youth ages 15-24, who contend with significant barriers to assistive support for TDV victimization and perpetration linked to socio-historical and structural disparities.

Objective: This study identified: (a) rural male youth's preferences with regards to content, resources, and features in app-based dating violence prevention intervention and (b) unmet needs related to barriers and facilitators for using this type of intervention in rural contexts for supporting healthy relationships and preventing dating violence.

Methods: Overall, 14 young males participated in three online focus groups and another 13 completed phone interviews stratified by age 15-17 years and 18-24 years. Our semi-structured interview guide drew from the Unified Theory of Acceptance and Use of Technology (UTAUT) - a merger of eight technology adoption and behavior change theories. Qualitative analysis was performed using the qualitative description analytic method.

Results: Twenty-seven participants were part of this study, 81% White, nine participants were aged 15-17, and 18 were aged 18-24, with 18 being the average age. Three main themes emerged from our data: (1) *The Rural Context and Lack of Useful Resources*, (2) *Challenges to Uptake and Facilitators for Usage*, with two subthemes (2a) *Structural and logistical burdens* and (2b) *Rural masculinity disrupting help-seeking*; (3)

the final theme, *Acceptability and Design of the Intervention*, itemizes participants' intervention "must-have" content, resources, and features (i.e., aesthetics, and functionality).

Conclusions: This qualitative sub-study discovered barriers and facilitators to using technology-based interventions for dating violence prevention among young rural males, as well as the increasing inevitability for rural-specific dating violence support services. This study also offers pragmatic "ready-to-use" guidelines for the design and adaptation of an evidence-based technology-based TDV intervention for rural youth, taking into account their social realities to increase the acceptability of this form of technology-based intervention for this population.

KEYWORDS: social media; survey; adolescent; young adults; rural; males; dating violence, relationships

Introduction

Psychological, economic, and sexual dating abuse, harassment, physical and online bullying, and teenage dating homicide among youth in the form of a past or present romantic or consensual relationship are all examples of teen dating violence (or TDV) (Niolon et al., 2015). According to research, one out of every four to one out of every eight middle-to-high school students will be exposed to TDV before the age of 18, having a major effect on middle-to-high school students (Breiding et al., 2014; Basile et al., 2019; Lutzman, Vivolo-Kantor, Holditch Niolon, & Ghazarian, 2015).

According to the 2019 National Youth Risk Behavior Survey (YRBS), 8.2% of high school students have experienced physical dating violence, 8.2% have experienced sexual dating violence, and 10.8% have experienced sexual violence by someone, with 50% of cases being perpetrated by anyone other than a dating partner (Basile et al., 2019). During the previous 12 months, over 19.5 percent of students reported bullying on school grounds, and 15.7 percent reported bullying online (Basile et al., 2019). Psychological dating violence is the most common form of abuse in dating relationships, with up to half of the study samples reporting this type of abuse (Zweig et al., 2013). According to recent research, female and LGBTQ teenagers are more likely to witness three or more forms of abuse than their cis/heterosexual peers (Basile et al., 2019; Dank, Lachman, Zweig & Yahner, 2014). TDV also varies by grade (highest in 12th grade) and race/ethnicity (highest among American Indian or Alaska Native youth) (Basile et al., 2019). For several, their first encounter with dating violence occurs in dating or casual relationships with a current or ex-partner (Glass et al., 2017); the highest TDV incidence occurs between the ages of 16 and 18 (Coker et al., 2014; Foshee et al., 2014; Haynie et al., 2013).

TDV has both additive and drastic effects. TDV has been related to a variety of negative outcomes, including deviant gang involvement, unsafe sexual behaviors (Shorey et al., 2015), early onset of substance use, unintended teen pregnancy, mental health issues, self-harm, suicidal thoughts,

low academic performance, and social inclusion (Coker et al., 2014; Haynie et al., 2013). TDV also causes depression, anxiety, post-traumatic stress disorder, suicidal ideation, and actual suicide (Murray & Azzinaro, 2019) and is strongly linked to future use of violence (Murray & Azzinaro, 2019). (Miller-Perrin, Perrin, & Renzetti, 2017; Pensak, 2015; Vagi et al., 2013).

Dating Violence in Rural Contexts

Rural inequalities influence the patterns, frequency, and severity of dating abuse in ways that are similar to or different from those seen in metropolitan America. Rural youth have nearly twice the prevalence of TDV as urban youth (Sianko et al., 2019), but they have received little attention in the dating abuse literature (Martz, Jameson, & Page, 2016; McDonnell, Ott, & Mitchell, 2010; Spencer & Bryant, 2000; Vézina & Hébert, 2007). In a regional study conducted by Spencer and Bryant (2000), rural male youth had the highest TDV rates (18%) as compared to urban and suburban youth (9 percent each). The same study discovered a similar difference between rural female youth (14%) and their urban (6%) and suburban (8%) counterparts (Spencer & Bryant, 2000). In comparison, Edwards (2015) discovered similar victimization rates regardless of rurality in his research. Rural survivors, on the other hand, had the worst psychosocial and physical health outcomes due to a lack of available and high-quality support services (Edwards, 2015).

Rural TDV is exacerbated by poverty, fragmented and inconsistent support services, the opioid epidemic, a shortage of trained professionals, discrimination and oppression faced by minority youth, high social cohesion (threatening confidential services), and psychosocial causes (e.g., restrictive gender norms, patriarchal ideologies, and a low bar for abuser accountability), according to advocates and researchers (Bloom et al., 2015; Edwards et al., 2014; Martz, Jameson, & Page, 2016; McDonnell, Ott, & Mitchell, 2010). Furthermore, scholars characterize rural values of self-sufficiency and trauma fatalism (the belief that one's fate is determined by a higher authority or force beyond one's control) as characteristics of rural culture. These factors lead to resistance to finding assistance and fear towards outsiders (Gessert et al., 2015; Keller & Owens, 2020; Maercker, Ben-Ezra, Esparza

& Augsburger, 2019). According to Martz et al. (2016), the essence of rural contexts makes it difficult for some rural youth to cope with the consequences of TDV, exacerbating TDV-related issues in a resource-limited environment.

Though rural adolescents and young adults are understudied in dating violence research (Martz et al., 2016; McDonnell et al., 2010; Sianko et al., 2019), existing studies do not account for the impact of rurality on rural TDV (Robinson and Ryder 2014). Rural youth slip through gaps in prevention efforts in the absence of sufficient assistance. As a result, there is a need to understand the complex cultural and socio-ecological factors accessible through qualitative approaches.

Technology-based Interventions for TDV

Today's youth are "digital natives" (children born and raised in the digital world) who have a very different relationship with technology than their "digital immigrant" parents (Marwick, Murgia-Diaz, & Palfrey, 2010; Palfrey & Gasser 2008). We can now deliver critical services to hard-to-reach youth through leveraging technology-based interventions, especially those who prefer technology-enabled interventions (such as online digital platforms) and the privacy and confidentiality of technology-based interventions (Ranney et al., 2013; Zhou et al., 2019).

Approximately seven out of ten US teenagers own smartphones, with approximately 90 percent of phone owners possessing internet connectivity on those devices (Lenhart et al., 2015). Integrated technology-based health interventions delivered to at-risk, low-income, and medically underserved communities hold great promise for lowering the risk of dating violence and increasing funding to overcome social barriers prevalent in rural areas (Bloom et al., 2015; Glass et al., 2017). We can target young people who choose technology-enabled approaches for their ease, privacy, and confidentiality by using emerging technologies (smartphone and social media platforms) (Ranney et al., 2013; Zhou et al., 2019). Given the social and socioeconomic gaps that exist in most rural areas, rural youth stand to benefit from innovative efforts that provide useful solutions where they want to be served. The COVID-19 pandemic has revealed service delivery system disruptions for victims of

partner abuse in need of assistance and protection resources, revealing many structural and socioeconomic inequities (Emezue, 2020).

Scholars regard gender-transformative projects aimed at constructively involving men and boys as partners and co-beneficiaries of violence reduction work as a game-changing solution (DeGue et al., 2014; Flood, 2018; Miller et al., 2013; Jewkes, Flood, & Lang, 2015; Wells et al., 2013). In the last 20 years, attempts to engage men and boys in violence reduction have yielded significant results that not only affect the lives of men and boys, but also ensure gender equality for women and children (Flood, 2018; Kato-Wallace, Barker, Sharafi, Mora, & Lauro, 2016). Because of the high prevalence of sexual violence on college campuses, specific programs target naturally occurring male-only social networks (e.g., brotherhoods, football men, fraternity males) that are at risk of perpetrating or experiencing coercive and violent sexual behavior reinforced by group-endorsed traditional male dominance, rape myths, gender stereotypes (“boys should not be victims”), and rigid masculinity (Choate, 2003; Marquart et al., 2007). This fact necessitates involving young men and boys in an important role in ending violence and reducing men's and boys' ideological hostility against gender justice and violence prevention (Flood, 2018).

We conducted a qualitative sub-study using qualitative description and a human-centered design heuristic framework to inform the design of a technology-based dating violence prevention intervention and to understand socio-technical factors that may affect uptake and acceptance of this type of intervention. The literature on rural male youth technology-based preferences for a dating violence behavioral intervention is limited. This study's priority population was young males aged 15 to 24 who lived in rural areas.

Objectives

This study identified: (a) rural male youth's preferences with regards to content, resources, and features in app-based dating violence prevention intervention and (b) unmet needs related to

barriers and facilitators for using this type of intervention in rural contexts for supporting healthy relationships and preventing dating violence.

Theoretical Framework for the Qualitative Study

This study was conducted from a social constructivist perspective (Burr, 2015), with the researcher and participants serving as co-creators of information about the obstacles and facilitators to using an app-based dating violence prevention intervention, as well as the intended content, features, and functions of such an app. Our semi-structured interview guide drew from a behavior change and technology acceptance conceptual framework called the Unified Theory of Acceptance and Use of Technology (or UTAUT) (Venkatesh, Thong, & Xu, 2012) from the information science and IT fields. The UTAUT model theoretically triangulates eight technology adoption and behavior change theories, including the theory of planned behavior (TPB) (Ajzen, 1991), social cognitive theory (SCT) (Bandura, 1986; Compeau & Higgins, 1995), the theory of reasoned action (Fishbein & Ajzen, 1975), the technology acceptance model (TAM) (Davis, 1989), the innovation diffusion theory (IDT) (Rogers 1995), to name a few. The UTAUT model was appropriate for this study as it considered socio-ecological constraints (i.e., social norms, community standards, environmental setting), the availability of and access to technology-based health interventions (i.e., device ownership, internet access), and the perceived utility of technology-based interventions (i.e., performance and effort expectancy). Questions in this study's interview guide were framed to explore the UTAUT model's four theoretical constructs focused on human-centered and socio-technical issues that can influence the use and uptake of technology-based interventions (i.e., performance expectancy, effort expectancy, social influence, and facilitating conditions) used to predict behavioral intentions to use app-based dating violence prevention intervention based on four moderators (i.e., age, gender, experience, and voluntariness) (Venkatesh et al., 2016). With guidance for modifying the UTAUT model from Venkatesh and colleagues (2012), we include *Rurality* as an additional moderator and important construct for working with underserved groups with unique culture care preferences.

In this way, we explored the relationship between rural male youth tech-adoption beliefs linked to social norms for help-seeking in this way.

Methods

Qualitative Data Collection

This qualitative study is part of Health-*e* BROS! Study (BROS: Better & Healthy Relationship Outcomes) study. The primary study used an interpretive and dialectical approach grounded in relational dialectics theory (RDT) to understand rural young males' TDV risk communication and risk perceptions. The design, rationale, and primary findings for the Health-*e* BROS! Study have been reported in detail elsewhere (Emezue, Dougherty, Maithe, Bullock & Bloom, in prep). In brief, 14 young males participated in three online focus groups and another 13 completed phone interviews stratified by age - 15-17 (middle adolescents) and 18-24 (emerging adults) to account for differences in developmental and age consideration for dating violence. All interviews were conducted by a primary author (CE).

Setting and Recruitment

Recruitment was done via paid ads on Facebook and Instagram, community outreach to youth-serving organizations, and a weekly bulletin broadcast on a large Midwest campus. Online ads targeted youth in rural US counties based on the 2010 Rural-Urban Commuting Area codes (US Department of Agriculture, 2013) to identify rural and medically underserved areas. Focus groups allowed for intergroup topic elaboration, highlighting areas of agreement and disagreement, whereas individual interviews allowed for rich and in-depth reflection that circumvented issues with group-think and enabled the collection of “rich deep data through one-on-one discussion and probing” (Milne & Oberle, 2005, p. 414). Another justification for using individual interviews was to target those who, for different reasons, choose not to be interviewed in a group environment.

Eligibility

Participants were eligible if they lived or schooled in a rural county or medically underserved area, identified as male, 15-24-years old, having dated since age 13 (serious or casually dating), comfortable speaking and reading in English, with access to an internet-connected computer or phone. Past dating abuse was not a precondition for eligibility. All participation was voluntary and confidential. Sampling continued until data saturation was reached, where iterative interviews did not generate any new codes but mirrored prior findings with this sample. Our university's IRB approved this study. Participants consented, with a waiver of written and parental permission, given the study's minimal risk and to maintain the privacy and confidentiality of youth seeking other confidential services in small rural towns. Participants were informed of the study's intent, foreseeable risks, and their rights to terminate participation at any time without consequence.

Study Procedures

We convened three focus groups and 13 individual interviews with participants who were not part of the focus group discussions. Participants completed online eligibility and demographic questionnaire on Qualtrics™, where they first read an online consent form. Enrollment was open from August to November 2020. Eligible participants were invited to a focus group discussion or phone interview based on their availability to join pre-scheduled sessions. While focus groups helped create meaningful dialogue between participants, individual interviews were empowering for some who may have had prior abuse histories. The research team developed an interview guide centering the Unified Theory of Acceptance and Use of Technology (UTAUT) theoretical framework, specifically by framing interview questions around core socio-technical constructs from the UTAUT model. This socio-technical perspective centers the user within a social context that influences their use and uptake of tech-based interventions.

Study procedures were the same for focus group discussions and individual interviews, except that in focus group discussions, participants were shown two short videos to give context to dating violence conversations. The first video showed a young woman being psychologically abused

by a male partner who also used isolation, social media, and phone stalking techniques with signs of physical violence (not explicitly shown). The second video showed a young man being attacked verbally and physically on school grounds by his girlfriend. Each video ended with the National Dating Violence 24/7 text, phone, and live chat service number.

A semi-structured open-ended interview guide was created with two main sections. Questions in section one (Questions 1-9) were analyzed and reported in the primary study. In this sub-study, we analyzed distinct questions (Questions 10-14) using an entirely different analytical method. The interview guide was originally designed to answer two different specific aims, using two sets of questions. In this sub-study, we asked rural young males to describe: (1) Their intention to use and perceptions of technology-based interventions for TDV prevention and (2) Barriers and facilitators for using this type of intervention for supporting healthy relationships and preventing TDV. Sample questions asked include: “What kind of features/function/resources do you think would be useful in a TDV app?” “Can you describe what can encourage or discourage you from using an app like this?” To ensure that we did not overlook any design, content, or topic areas aspects, the interview guide ended with ‘*wishlisting*’ questions. For example, we asked, “If you were to design an anti-TDV app like this, list the top five features you will add to the app?” “What three things will prevent you from using an app like this?” At the end of the interviews, participants were asked if they had anything to add or wanted to change their answers to a previous question.

This ‘*Wishlisting*’ needs elicitation strategy is used strategically for program planning and concept mapping to provide a list of representative ideas that can be immediately used (Trochim et al., 2004). Wishlisting helped us collect “hard data” on unmet needs and encouraged participants to indicate unique desires overlooked in previous discussions (Trochim et al., 2004, van Leersum et al., 2020). This strategy also helped us better understand the need for technology-based intervention supporting healthy relationships and preventing TDV in a service disparity setting (Trochim et al., 2004, 2006). Focus groups and interviews lasted 45-60 minutes, and participants were compensated with a \$20 Amazon e-gift card in exchange for their time and expertise.

Data Analysis

A qualitative descriptive (QD) analysis using a pragmatic approach guided our data analysis and interpretation. QD is a low-abstraction, naturalistic, low-inference inductive approach used to closely interpret the data to garner a concise description of rural young male experiences navigating support and resources for dating violence experiences (Neergaard, Olesen, Andersen, & Sondergaard, 2009; Sandelowski, 2010). We chose this method as it is primarily ideal for describing phenomena from the participants' own experience and own language, problem identification, and idea generation, and is therefore particularly well-suited for needs assessment and intervention development with vulnerable populations (Neergaard et al., 2009). This approach championed the co-creation of knowledge and ensured participant feedback was not over-analyzed or given connotations beyond the practical and utilitarian needs described during the study (Neergaard et al., 2009; Sandelowski, 2010).

The first author (CE) performed all interviews, and three team members (CE, LB, TB) read and re-read each transcript before importing them into NVivo (Release 1.3 by QSR International), where transcripts were inductively analyzed using "*in vivo* coding" to find, sort, and compare codes iteratively. After uploading on NVivo, transcripts were further analyzed to generate a modifiable codebook that was discussed in weekly team debriefing sessions where differing views were resolved. After sorting, rearranging, and comparing codes, we formed categories/subcategories by pooling selective codes based on commonality, divergence, and logical parsimony (Rossman & Rallis, 2012). Initial themes were grouped and regrouped under main themes (Lincoln & Guba, 1985). Central themes were then chosen based on generalizations that held true for the data and are accompanied by participant excerpts. Themes were categorized and analyzed within the constructs of the UTAUT model. The researchers' reflexive notes and bracketing focused on critically appraising every research decision, prior assumptions about rural youth, cross analyzing the data, and comparing findings with current TDV literature. We used various procedures to ensure the authenticity, credibility, criticality, and integrity of this study based on recommendations by Neergaard et al. (2009). Other methods to ensure rigor were data triangulation using multiple data collection methods

(focus group discussions, individual interviews, *wishlisting*), theoretical triangulation (using the constitutive UTAUT model), preservation of the research audit trail, bracketing of research bias in fieldnotes, regular team debriefing meetings (Creswell & Creswell, 2018). Demographic data were analyzed on Excel, and results from the demographic analyses were used to describe the study sample.

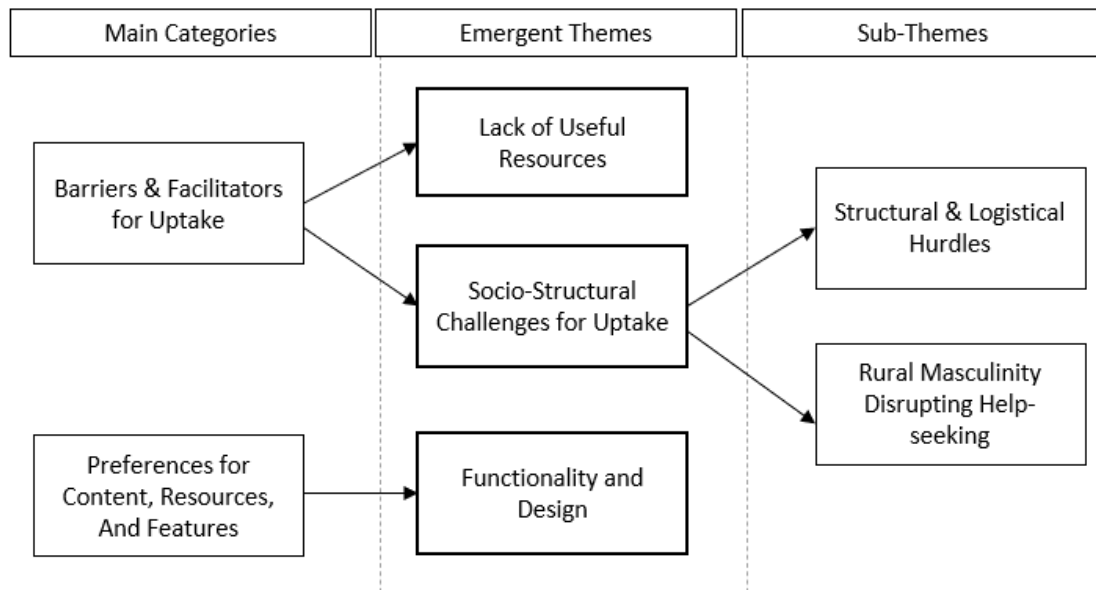
Results

Participant Characteristics

From August to November 2020, the primary study enrolled 27 participants generating a total of 3 focus groups and 13 individual interviews. From this, nine participants were aged 15-17, and *another 18 were* aged 18-24. Participants' age ranged from 15-24 (Mean age =18.6 years \pm 1.9 years). Over 81% self-identified as White, as Black or African American (2%), Asian (14,8%), American Indian or Alaska Native (3%), Native Hawaiian or Other Pacific Islander (1.49%), and as Other (3%). Just 7.46% of participants identified as Hispanic. Eligible respondents came from rural Midwest (n=18), Northeast (n=4), South (n=3), and West (n=2). One participant from rural British Columbia, Canada, was interviewed to establish contrast or convergence with US rural males.

Three main themes emerged from the data. The first theme, *Lack of Useful Resources*, described rural young men's perspectives on currently available TDV resources and assets available to rural youth. The second theme, *Socio-Structural Challenges for Uptake*, highlights participants' views on specific social and structural factors related to using a technology-based intervention in rural settings. This theme produced two subthemes: *Rural-Specific Logistical Hurdles* and *Rural Masculinity Disrupting Help-Seeking*. The final theme, *Functionality and Design*, itemizes participants' intervention "must-have" content, resources, and features such as functions and aesthetics (look-and-feel, colors, font).

Figure 1. Illustration of main themes and sub-themes



Lack of Useful Resources

Under this theme, participants explained available services and resources they knew of or used in their communities, outlining possible socio-technical contexts in which those resources would be used if they needed help for TDV victimization or perpetration. Participants agreed that comprehensive programs for rural youth experiencing dating violence were limited and inadequate. Some, for example, saw school personnel (e.g., school counselors) as inefficient and untrustworthy, vulnerable to escalating abuse disclosures, or ill-equipped to provide material and emotional support, especially in underfunded schools. Relevant support services were challenging to locate and access in rural communities, as this participant pointed out:

“... I feel like there's probably one counselor for that specific thing. And they probably are overwhelmed with less specific cases because we only have something like four counselors, and we have a town of 13,000 people...I've heard things about them not being the most competent in that area. I've heard that they're fine, but not the ideal resource.” [15-year-old]

Similarly, another participant said:

“Well, there's a couple of counseling agencies that are in my area, but I live in a fairly small town. So, there's not a whole lot. If you go to the next town over, there's a couple of women's shelters for that sort of thing. It's like 45 minutes away. So, you'd have to take the bus or get a ride at least at my age because we don't have driver's licenses yet.” [15-year-old]

In some instances, trusted adults (including teachers and parents) were described as lacking the requisite skills to intervene successfully. Participants also noted the challenge of discussing a sensitive subject like dating abuse with an adult. Dating violence conversations were especially difficult to initiate with trusted adults in their social convoy and were often met with outrage and suspicion from parents who claimed their teenager was the exception. This skepticism made it harder to disclose abuse or seek help for an unhealthy relationship, as this participant noted:

“I just think it's harder to talk to adults because you never know what they're going to be accepting of because they came from a different time. So, we kind of have an idea of kind of the spectrum of beliefs [acceptable] in our own age, but it's kind of harder when they're an adult to gauge where they're at with that.” [15-year-old].

Given the inherent difficulties in relying on trusted adults for assistance, many rural males turned to informal outlets such as friends and online social networking sites for assistance and peer co-rumination, as one participant indicated:

“There were a lot of people in my friend group that were in semi-abusive relationships, including me. We kind of just, you know, dealt with it just with our friends.” [18-year-old]

In addition to demonstrating a dire need for anti-TDV service for some of these “semi-abusive relationships,” participants reported a lack of resources (particularly for male victims of dating violence), which restricted their ability to support each other effectively. In a focus group, one teen identified this as a crucial issue impeding help-giving intent and behavior:

“Honestly, like I have no clue what, like, the resources are for guys who are in abusive relationships. Like, I can tell you the resources for like girls in abusive relationships. I know certain people who

specialize in that, but with the guys, there was just nothing. The most I [could] do for one of my friends who was in an abusive relationship was just try to spend as much time with him in order to take time away that he could be spending in the abusive relationship.” [Focus group, 15-17-year-olds]

Another commented:

“There's like a huge, like some variety of places that women can go, like guys have to look a lot harder for that. I wouldn't really know where to send a friend of mine if they were in a relationship like that.”

[Focus group, 15-17-year-olds].

This participant appeared to identify a lack of resources in his community, especially for males. This showed a critical need for services that catered to all youth, as well as services that rural males were willing to use. Formal programs are often used as a last resort by most teenagers and are commonly sought out in cases of more serious dating violence (e.g., rape or sexual assault) where other informal means of help have proven inadequate.

Socio-Structural Challenges for Uptake

This theme identified socio-ecological obstacles that could potentially influence the uptake and use of technology-based TDV interventions by rural young males. Specifically, two sub-themes contextualized these socio-ecological obstacles at the individual and community levels of impact:

Structural and logistical hurdles and *Rural masculinity disrupting help-seeking*.

While the majority of participants responded favorably to and saw the concept of an app-based dating violence prevention intervention for rural youth as a welcome opportunity, their responses to uptake varied significantly. When asked whether they would use an intervention like this to prevent dating violence and foster healthier relationships, young males' responses varied, as shown by the quote: “I think that kind of app could be useful, could help people that are in that kind of relationship.”

While this participant expressed interest in an anti-TDV technology-based intervention, another participant confirmed that he would use the app in addition to other services available in his social convoy:

“...seeing how the app is specifically tailored for this kind of thing, I would probably resort to the app first. Then if I find something, I would try to talk to my family and friends about it, and then actually discuss what’s going on with my partner.” [17-year-old],

This participant described the app as a way to start a conversation with family and friends. However, another participant indicated how the app could be helpful as a last resort:

“If they’re using an app, then it’d probably be they sort of given up on trying to talk to the rest of us about it. I feel like if we knew the situation a lot more personally, they would prefer to talk to us, but I still think they would use that kind of app because I don’t know. It just fits some of them the way they are. Some of my friends are very introverted and not very good at talking.”

Similarly, another stated how some of his friends would not use this type of app-based dating violence prevention intervention:

“I feel like some guys would love this app... I feel like maybe some of my friends might use it. But I feel like some guys probably wouldn't even if they were in an abusive relationship.” [18-year-old]

We began to recognize not only a need for this form of app-based dating violence prevention intervention but also how various factors could influence participants' decisions and intentions to use this type of intervention. Trust and confidentiality, for example, were critical issues for using apps to reduce dating violence and foster healthier relationships, as they are with most apps intended to encourage behavior change. The experience of dating violence was traumatic enough, and in this high-trauma context, participants explained how digitally delivered interventions could be unsafe if the perpetrator found out they were using the app or if personal information on the app became public, as explained here:

“I mean, they're entering into this app that probably goes to some headquarters or probably some big city, and they would be worried about it...I think they'd more be just worried about it if people in their community found out what they said.”

Other challenges to app use were “apps without a password” being potentially unsafe, apps being “so committal,” requiring installing and opening an account. Also, “Clickbaity apps that made you look at ads first,” “apps with bad reviews,” “glitchy apps that did not look professional,” and “apps that cost money to use” were recurring concerns.

Structural and logistical hurdles. In addition to these app-level challenges, wider community-based obstacles were also discussed. For instance, internet dead zones and low-connectivity areas at home were common in smaller rural communities, presenting barriers to using this type of technology-based intervention. Since we conducted this study during the COVID-19 pandemic, when instances of partner abuse increased exponentially (Emezue, 2020), the pandemic became a backdrop to contextualize how daily internet-based processes such as online learning and social networking were impacted during the stay-at-home mandates. Some participants described creative solutions around this community-based issue, describing their use of shared personal or family cellular data plans or Wi-Fi hotspots in public areas (e.g., schools, libraries, a friend's house):

“A lot of people here either don't have internet or don't have very good internet. Well, my computer really only works at the house but my phone I can use, you know, at like the grocery store or something or if I'm out at a friend's house...” [17-year-old]

Notably, sharing data plans (standard with youth living at home) could expose those seeking help for dating abuse, as parents or partners could track family plans and browser histories. Our participants were also keenly concerned that app-based dating violence prevention interventions with high data burden (e.g., video and audio content) could be problematic to use given noted limitations with internet access in some rural areas.

Rural masculinity disrupting help-seeking. When asked about how (and if) masculinity (or the production of everyday manliness in rural culture) would affect help-seeking and using a technology-based intervention for dating violence prevention, coming across as weak and vulnerable was a prominent concern for some. This topic arose because help-seeking is generally feminized as being antithetical to masculinity (Hiebert et al., 2018). For example, a young man said:

“I don't need an app to tell me what to do in a relationship.” But I feel like some guys would love this app. I feel like maybe some of my friends might use it. But I feel like some guys probably wouldn't even if they were in an abusive relationship.” [18-year-old].

Similarly, impression management and social stigma linked to hegemonic ideals of help-seeking among men were recurrent obstacles to the use of apps like this. One participant described this as a dilemma for popular help-seeking apps exposing their user's vulnerability:

“There's kind of like this social thing that maybe if somebody sees me using this app, it might be weird. It depends if the app does become popular and depending on how the app is viewed in society, that'll be a big thing if it is looked at as [weakness], then obviously they're not going to want to use it.” [18-year-old]

Another participant contextualized how his friends viewed help-seeking in dating abuse contexts:

“Like a friend of mine was having a lot of problems in his relationship and he didn't talk to us about it for three months until one of us noticed how, I want to say depressed, but I don't want to put it on the same level as actual clinical depression, but he was at a real bad place mentally. I think he was worried, like most guys are, about the whole. I have to uphold the image of me being the man and not show emotions. I have to be the tough one.” [17-year-old]

According to these descriptions, dating violence was a highly gendered problem, and seeking assistance was also hampered by the social and injunctive norms of self-sufficiency that characterized rural life. Even with these social obstacles, masculine norms did not sway some participants' intentions to use an app-based dating violence prevention intervention. This norm-defying

perspective was particularly prevalent among older adolescents, as two participants in the following quotes demonstrate:

“I think my relationship with my friends is at a place where I wouldn't feel embarrassed if they saw the app on my phone or vice versa. It would definitely open up a conversation into why they have the app or why I have the app.” [Focus group, 18-24-year-olds]

“I'm close enough as my friends to where they really just be like, “Oh, is everything all right, man?” Like it would probably end up being a positive experience, with the conversation following.” [Focus group, 18-24-year-olds].

In view of all the obstacles considered to affect rural male intention to use an app-based dating violence prevention intervention, the disparity in intentions to use an app like this seemed to be due to public expectations of how app users would be viewed, and not so much the app itself. While we did not present any app prototypes to our participants, we did consider their responses in the following theme, which was heavily focused on what details, resources, and features were required in an app-based dating violence prevention intervention.

Functionality and Design

Young rural males identified a desire for technology-based interventions that improved, not replaced, any existing in-person modalities. However, for some participants, their needs were more pragmatic. They suggested integrating an app-based dating violence prevention intervention with other social and behavioral health support services, such as sexual and healthy relationship programs, school training (e.g., bystander programs)— articulating how useful such an intervention could be for peers and friends experiencing dating violence and in need of confidential support.

In terms of the acceptance of an app like this, we asked what resources they would turn to first for help in an abusive relationship if the only options were turning to family, friends, apps/online resources, or talking through it with their partner. Participants had mixed feelings about technology-based interventions, recommending this as a great place to start, while others preferred talking to a

friend first. Interestingly, another participant based his decision to use an app-based dating violence prevention intervention on the type of violence endured, demonstrating a stronger intention to use the app only while witnessing physical abuse as opposed to emotional abuse:

“Yeah. So, first of all, I kind of think that that would depend on, I suppose, the kind of abuse that I was getting because I feel like if I was being physically abused and talked to someone like my father or someone else, then that would be much more understandable than, you know, emotionally abused...if it was more emotional abuse, I would definitely use the app.”

In summary, the idea of a dating violence technology-based intervention was received positively by most participants, who described it as potentially useful for rural youth, so long as it addressed the obstacles and challenges to uptake we discussed earlier. Our participants also identified a variety of desires (i.e., intervention “must-haves”) grouped by preferred content, resources, and features (i.e., aesthetics and functionality). Table 2 summarizes these wishes and requirements from our interviews, given the barriers and facilitators already discussed.

Table 1. Overview of Desired Content, Resources, And Features.

Codes	Specific wishes
<p>Desired intervention content</p>	<ul style="list-style-type: none"> • Tailored content on healthy and unhealthy relationships • Stress-reducing content (e.g., mindfulness, meditation, breathing exercises, meditative sounds), • Tips on enhancing academic performance, • Relationship advice (“similar to content on the subreddit page: r/relationship”). • Health: Mental and physical health trackers, calorie tracking, social media time tracking, • Inspiration: Survivor stories/peer testimonial videos • Encouraging messages ("you're not alone," "it's not your fault," "here are examples of other men being abused")

	<ul style="list-style-type: none"> • Skills for: <ul style="list-style-type: none"> - Conflict resolution and violence de-escalation skills - How to spot red flags of abuse - Assessing risk of abuse and perpetration - How to leave an abusive relationship - How to get support if they were the abuser - “Way to understand your emotions.” • Inclusive content for Sexual and Gender Minority (SGM) youth and neuro-diverse youth • Specific content on mental health (suicide prevention, depression) • Pre-scripted messages • Personalized feedback and normative information • Specialized resources: “less in-app counseling and a more direct link to support.” • App pace considering severity and urgency of abuse
Desired Features	<ul style="list-style-type: none"> • Onboarding messages/profile screen with information about the app, statistics on abuse • One-touch call or a helpline for emergency and crisis management. • Q&A chat function (“like ask.com”), anonymized • Passcode to prevent app breach. • Text-a-day response to “how are you feeling today?” • Daily input log • Content sent at different times of the day. • Talk or text with a real person. • “Organic” and “less forced” push and pull delivery methods. • Short, relatable, and tailored message to each user • Resource mapping in the moment: “do you have access to your car, your phone?”

	<ul style="list-style-type: none"> • Mature and semi-formal tone, not patronizing (e.g., using emojis). • Content as short videos (3 minutes or less), short-form audio, text, multi-choice questions, and interactive quizzes • Instantly gratifying opening pages, “people decide on an app in 30 secs to a minute,” • Targeted Feedback • Signposting to online resources
<p>Desired Aesthetics</p>	<ul style="list-style-type: none"> • Fonts & Colors: no consensus on preferences as seen in participant quotes. <ul style="list-style-type: none"> ▪ “Calming visuals.” ▪ “Male colors - like dark blue, dark red, dark green, orange.” ▪ “Most guys are not big fans of soft color (purple, pink, baby blue).” ▪ “Maybe for colors, maybe like more happy colors, like colors that your brain associates with being happy.” ▪ “Monochrome colors like black and white will not be engaging.” ▪ “Bright colors are girly colors.” ▪ “Maybe not darker colors like black or red or something along those lines, because those are considered more like sad or menacing.” ▪ "Modern text." Oddly, some of them referred to “masculine fonts.”
<p>Desired Functionality</p>	<ul style="list-style-type: none"> • Offline functionality to reduce data burden. • Good integration with smart and non-smartphones, intuitive “so it's not a drag to use,” • App as an intermediary tool: triaging and referral to trusted services. • Adaptive app with screening questions using an algorithm or rule-based module on forms of abuse and user/abuser characteristics. • App can record evidence of abuse (protected from an abusive partner.)

The items in Table 1 provide fundamental insight into rural male youth expectations for content, tools, and features in an app-based dating violence prevention intervention. Not only can this be the starting point for designing an app-based dating violence prevention intervention, but this study elucidates some unmet needs related to barriers and facilitators for using this type of intervention in rural contexts for supporting healthy relationships and preventing dating violence. App designers and program planners can begin here to plan curricula for anti-TDV interventions. We agree that these technical needs and contextual factors can be extended to other socio-behavioral problems that are responsive to technology-based interventions. For rural adolescents in under-resourced environments, various behavioral and health-related psychoeducation can be creatively bundled into a brief immersive intervention with very low user and data burden.

Discussion

Given that rural youth report near twice the prevalence rate of TDV compared to urban youth, are understudied in the dating violence literature, and face several significant regional barriers, we considered their help-seeking intentions and preferences. Our qualitative descriptive analysis revealed encouraging findings regarding the positive and negative assessments of app-based dating violence prevention intervention to prevent dating violence and promote healthy relationships. Young men in our study found the idea of an app or technology-based intervention for dating violence a welcome idea, so long as it considered their lived realities. Three themes emerged from the data: Three main themes emerged from our data: (1) *The Rural Context and Lack of Useful Resources*, (2) *Challenges to Uptake and Facilitators for Usage*, with two subthemes (2a) *Structural and logistical hurdles* and (2b) *Rural masculinity disrupting help-seeking*; (3) the final theme, *Acceptability and Design of the Intervention*, itemizes participants' intervention "must-have" content, resources, and features (i.e., aesthetics, and functionality).

Even with convergent feedback, there were noted differences in participant preferences and suggestions from rural male youth (aged 15-24) to inform the creation of youth-endorsed initiatives

and recommendations for technology-based approaches to reduce dating abuse. Rural masculinity and reputation management seemed to affect their decision to use technology-based intervention, as this form of intervention was linked with connotations of weakness and vulnerability. Although, the ease, anonymity, and social facilitation provided by technology-based interventions seemed likely to counteract the impact of heteronormative masculinity, possibly because the app offered a closed-end mechanism in a completely technology-based setting.

Even with general acceptance, security and confidentiality were other concerns with using technology-based dating abuse interventions. Participants took issue with non-password-protected apps, 'committal' apps requiring creating an account; apps with poor reviews, glitchy and unprofessional apps, suggesting intervention aesthetics and practical use are significant concerns and potentially predictive of engagement with technology-based interventions. Notably, beyond their hedonic aesthetic value, technology-based interventions designed for youth wellbeing must consider basic psychological needs with underlying behavior change techniques (BCT). This was a big issue for apps recognizable by their conspicuous logo or a distinct sound – like *Grindr* - a popular dating app marketed to gay men. These concerns were not surprising, given similar worries with using an app to obtain sensitive services (Emezue, 2020).

Whereas 'wishes' are highly subjective, random, calculated at the time of choice, and dependent on context, past experiences, and personal goals (Warren, McGraw & Van Boven, 2011), this tactic helped us uncover areas of consensus and 'standout wishes,' translatable to 'real-world' use and informative to program designer working with rural youth. Using a gender-focused approach also helped shed light on the dynamics of norms, values, and behaviors in rural social contexts. The results include actionable guidance to promote technology-based intervention design to address rural obstacles and facilitators identified by our participants. Using this person-centered approach makes technology-based interventions cost-effective, engaging, scalable, and adaptive to user situations (Peters, Calvo & Ryan, 2018).

This research is a formative and exploratory sub-study that confirms the UTAUT model's applicability as a framework for engaging with underserved communities to understand their technology needs as well as socio-environmental obstacles and facilitators for adoption prior to developing remotely and digitally distributed interventions. This study provides the basis for engaging rural youth in the co-design of digital or technology-based intervention, whether in the form of an app or web-based intervention. User-centered and human-centered design approaches are recommended to establish convergence and difference matching rural youth needs and intervention planning preferences. This holistic approach recognizes inherent problems that intensify dating abuse and identify rural assets and talents to create interventions grounded in young people's experiences. Notably, technology-based interventions have become even more valuable – particularly now that COVID-19 has disrupted standard social support channels, revealing socio-economic inequities in most rural areas.

Limitations and future directions

Despite the strengths of this study, some limitations should be noted. We had limited participation from racial and gender minority rural males. This limitation is notable because the views represented here leaned heavily on the perspectives of cisgender, heterosexual, young white males (81 percent), with likely differing opinions from racial/ethnic minority, queer, neurodiverse, and justice-involved youth, to name a few.

Similarly, conducting this study online may have excluded the groups we were most interested in recruiting. Although, rural youth have endorsed online recruitment and data collection methods as the best ways to engage them as part of a multimethod approach (Edwards, Greaney & Palmer, 2015). Notably, low-income, immigrant, unstably housed, and justice- and gang-involved youth and other trauma-exposed groups remain underrepresented in dating violence studies. However, the techniques used here (e.g., wishlisting) are pertinent in various settings and can be beneficial if these excluded groups are creatively recruited. The definition of rurality may also preclude some from

signing up for this study. We found this ambiguity during enrollment and used RUCA codes to retain participants who lived or schooled in a rural county or medically underserved area, or both. The generalizability of our research is limited, given these constraints.

Although leveraging the advantages of wishlisting to help us map a list of needs and desires, 'wishes' were highly subjective, spontaneous, gauged at the time of deciding, and based on circumstance, previous experiences with technology-based interventions, and personal interests (Warren, McGraw & Van Boven, 2011). Notably, in the absence of an actual app or technology-based intervention to be checked, participants could only clarify their needs and desires from a conceptual schema, apps they had used in the past, and not based on a real technology-based intervention to interact with, making it difficult for some to contextualize their wishes. The use of questionnaires and decision-aid guidelines in advance of interviews has been touted to improve this needs and preference elicitation process (van Leersum et al., 2020). The use of low-fidelity app mock-ups and wireframe designs are also useful ways to elicit specific feedback. However, our work was formative. We focused on attitudes and acceptance of technology-based interventions and not on any particular app.

Future studies could build on this formative work to create low and high-fidelity technology-based interventions as a promising vehicle for delivering psychoeducation and therapies at scale to rural youth who are otherwise hard to reach. Besides, studies to better characterize the effects of personal and practical facilitators and barriers with a representative sample of rural youth are needed. In these studies, youth must be part of the solution and serve as key informants or advisory board members at all stages of the intervention design process. Our findings bear implications for intervention design and evidence-based technology-based alternative (web, mobile, digital game and sensor-based interventions and tele-therapeutics) that could prevent or mitigate dating violence and related issues, as TDV seldom occurs without other determinants of health and wellbeing (e.g., mental health, adverse childhood experiences, etc.) These interventions are to be designed to augment but not replace current face-to-face models.

Conclusions

Given the barriers and facilitators to using technology-based interventions for dating violence prevention among young rural males and the menu of wishes, we have established a significant need for rural-specific services, with the potential for using an app-based dating violence prevention intervention. There is also a need for intervention planners to respond to rural youth needs while balancing the push-and-pull factors that keep them engaged in technology-based intervention. This study presents implications for how we design remotely administered and evidence-based interventions for those most in need. This research is a preliminary attempt to aggregate rural male youth knowledge and self-management needs to reduce dating violence through technology-based intervention. Rural dating violence will not decrease without concentrated emphasis on engaging rural male youth through innovative approaches that address some of the social and structural obstacles they face. Overall, racial and ethnic minority youth and male survivors of TDV are considered “hard to reach” and typically unresponsive to dating violence research invitations, calling on us to identify meaningful ways to engage with these marginalized groups.

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Chapter VI

DISCUSSION, CONCLUSIONS, AND RECOMMENDATIONS

The chapter includes a review of the main study findings, implications for practice, and suggestions for future studies on dating violence among rural youth. In this chapter, research, practice, and policy implications will be discussed. The chapter concludes with a discussion of the limitations and recommendations for future research.

Two specific aims were addressed using two analytical approaches. The first specific aim sought to identify perceived risk and protective factors of TDV among young rural males responsive to tailored digital interventions. Responses from participants highlight dialectical tensions in how rural young males understood, perceived, and described their risk for dating violence victimization and perpetration. In a prior study, Reese et al. (2001) examined perceptions of violence risk factors among low-income African American youth, finding interrelated risk factors for aggressive and violent behavior among an urban sample linked to economic adversity in the community. However, no prior study has focused on rural youth risk perceptions regarding dating violence, making this a novel contribution to anti-TDV prevention work.

This study's first aim identified two main themes of risk and protective factors expressed as dialectical tensions: (1) *Dialectics of Social Tensions* (2) *Dialectics of Help-Seeking & Help-Giving*. The first dialectic (i.e., dialectics of social tensions) point to differences in the use and operationalization of youth language and discourse manifested as inconsistencies not only in how rural young males viewed dating violence experiences but also in how their help-seeking intentions were expressed. For instance, the "Language Matters: Abusive vs. Unhealthy Relationship Dialectic" identified how rural young men affixed lower severity to *unhealthy* dating relationships than they did to *abusive* dating relationships. Furthermore, using language as a vehicle for decoding attitudes revealed how the same dating violence behavior could be interpreted differently by various groups of participants, thereby problematizing youth understanding of unhealthy and abusive relationships. This uncertainty can

precede misunderstandings in youth TDV risk perception and attenuate the impact of anti-TDV programs. Notably, language is essential in designing survey instruments used to assess dating violence, interpret results, and write policy guidelines, making dialectics a key consideration when designing anti-TDV programs, research, and policies (Hamby, 2017).

Similarly, the #MeToo vs. #WeToo dialectic established a dialectical tension between female and male victimhood and how survivors saw themselves relative to minority and majority discourse around victimhood. Greater social support and increasing believability for female survivors embedded in the #MeToo campaign was dialectically contrasted with narratives of male victimhood portraying invisible, dismissed, and overlooked male victims. Interestingly, the #MeToo dialectic position emerged as a sensitizing concept in participant counternarratives of victimhood.

The rural vs. urban masculinity dialectic ranged beyond the individual level to emphasize social effects on dating violence risk, focusing on rural vs. urban masculinities and how these masculine locations and ideologies promoted or protected from TDV. This social friction between rural and urban culture is not a novel finding. Still, it was noteworthy to see how it manifested itself within this age group (Brandth, 2016), making it necessary to expand support service for male victims, particularly in rural contexts where help-seeking was *feminized*. This dialectic in masculine identity parallels dialectic disparities in how specific forms of masculinity are perceived. For instance, *machismo* (and *caballerismo* often with positive connotations) have been described by male abusers to serve both positive and negative purposes in romantic relationships (Arciniega et al., 2008; Haglund et al., 2018; Marrs Fuchsel, Murphy, & Dufresne, 2012; Parra-Cardona et al., 2013).

Within *Dialectics of Help-Seeking & Help-Giving*, participants described social agents of help-seeking and help-giving using contradiction-prone assessments. These help-seeking agents acted in polar roles (Baxter & Montgomery, 2000) that both prevented and encouraged TDV risk. Thus, common agents of social support, including (1) Religion and Spirituality; (2) Local Preachers; (3) School Guidance Counselors; (4) Peer Mentors & Social Cohesion, were dialectically described to

connote contradictions in their functional usefulness to rural young males. Being religious, for example, was described as serving a protective role in rural communities where religious values regulated intra- and interpersonal behavior but engaged customs of male dominance and rural hegemonic masculinity centered on religious conservatism that promoted a conventional conception of gender and gender roles within some rural families.

In the second aim, this study sought to explore young rural male acceptability and preferences for content, features, and functions expected in a TDV prevention digital intervention. Research questions here were: (1) What are their perceptions of digital interventions for TDV prevention? (2) What are the barriers and motivators of use/uptake of TDV digital place-based interventions among rural males? (3) What type of content and features would you like to see in a TDV digital intervention for rural males? Using a low-abstraction analytical method (i.e., qualitative description), this second aim detailed diverse social and socio-structural barriers to uptake of technology-based intervention for dating violence prevention among young rural males. However, the overwhelming sentiment was one of acceptance of technology-based anti-TDV interventions - with caveats. Issues such as trust and confidentiality, rural masculinity, help-seeking, threat to one's reputation from being seen with an app like this, data and user burden, and peer buy-in were key influencers for uptaking technology-based intervention to support healthy relationships and prevent TDV. Participants also detailed pragmatic intervention essentials or "must-haves" they desired in an anti-TDV technology-based intervention that can now form the basis for a planned technology-based intervention with this cohort. The approaches used in this study can be extended to other underserved youth to capture their unique interests as they relate to their social circumstances.

Implications and applications

Research Implications

Given the novelty of some of the study's findings regarding rural youth risk perception and communication around dating violence, some conclusions of this study lend themselves to theory

development. Future studies may require a grounded theory methodology (Glaser, 1978, 1992; Strauss, 1970), combining deduction and induction in the theory-creation process to heuristically understand factors influencing risk perception beyond masculinity and social norms. This theory-development process will also call for comparative analysis between other at-risk groups not addressed in this study, thus building on parallels and discrepancies inherent within and across groups. A theory-building approach can begin to decode patterns of risk perceptions, communication, and responsiveness among minority youth populations, identifying constructs for risk-sensitive behavior change programs and theoretical propositions testable across comparison groups. Given the dialectical qualities of dating violence risk, whether as a survivor or perpetrator, such a theory-based intervention will provide a valuable heuristic for developing risk-sensitive interventions.

Given the lack of diversity in this study's sample, the next step will be to conduct focus groups for other youth groups, such as Black, Asian American, Indigenous, and Hispanic young men. Differences in risk perception and communication would be essential to compare given cross-cultural views of dating abuse and help-seeking. Already, some researchers report differences in post-trauma help-seeking activities and coping during trauma among ethnic minority youth (Eaton & Stephens, 2018).

Furthermore, since technology-based interventions are widely used, there are inherent implications beyond the substantive content of an intervention to consider intervention aesthetics and functionality as prognostic aspects of youth engagement with technology-based interventions. Of note, using Wishlisting methods to capture participant 'wishes' offered extremely subjective, spontaneous, and context-based suggestions for incorporation into a digital intervention (Warren, McGraw & Van Boven, 2011). While this needs elicitation technique provided valuable data, there was an overabundance of needs identified that may complicate the process of designing and adapting technology-based interventions for any specific population. Given this copious data, intervention planners can build on current findings by using more nuanced study designs, such as user-centered

methods and human-centered design (Gasson, 2003). In this way, results from this formative study can be used to understand participant needs. Future studies may benefit from using already-made prototypes of low-fidelity wireframe versions of an actual intervention that participants can appraise. This progression can center the process of Agile Software Development (Gasson, 2003.) as a logical next step for a human-centered technology-based anti-TDV intervention. Specifically, Gasson (2003) underscores this need “for a dialectic process, to achieve a balance between human-centered system outcomes and the design of an effective, formal technical [information systems] solution is emphasized” (p. 30).

Policy Implications

Youth in rural areas face a slew of risk factors. In dating violence prevention, many higher-order issues affect TDV experiences and how interventions are designed to address this issue. Broader and more effective TDV prevention has been closely correlated to strong evidence-based policies (Hoefer, Black, & Ricard, 2015). Another critical area for future research may be to explore the language used by high school districts and colleges in framing sexual assault policies. Policies may capture some of the dialectical tensions identified in this study to develop supportive programs and policies, especially for young people new to dating and managing dating relationships. For example, the prevalence of sexual harassment and rape culture on college campuses has been attributed in part to dialectical contradictions in characterizations of sexual assault, strategies to hold abusers accountable, and victim-centered programming on college campuses (Muehlenhard et al., 2016). At the community level, school guidance counselors were problematized in narratives, even though they are expected to provide supportive services. This dialectic should be explored further in order to identify ways to make this service more user-friendly for rural youth.

Limitations

There were some limitations in this study that bear addressing. First, the study recruited a predominantly White (81%) sample from the Midwest (65%) that may not reflect rural minority

youth experiences, challenges, and complexities with navigating support for TDV. Rural communities are highly heterogeneous, making generalization difficult. Moreover, Black, Asian American, Indigenous, and Hispanic young men draw from different ethno-racial schemas of masculinity, requiring focused attempts to reach these marginalized groups (Dworkin, 2015). Second, participants in this study were self-selected using a non-random sampling framework, possibly introducing a bias for those willing and able to participate in an online study and be compensated online as was done in this study. Similarly, conducting this research online may have omitted some of the youth groups we wanted to recruit. As part of a multimethod strategy, rural youth have embraced online recruiting and data collection approaches as the best ways to involve them. (Edwards, Greaney & Palmer, 2015).

Social desirability bias was another limitation in this study. Participants may not have felt comfortable addressing a sensitive subject like dating abuse, or they may have responded to gain the approval of their peers or the researcher in interview sessions (Dalton & Ortegren, 2011). There were also crucial logistical issues recruiting during the COVID-19 pandemic, where participants were scattered across different time zones, with competing demands for their time, making scheduling a challenging undertaking. Although concessions were made to accommodate several youths (e.g., interviews on weekends, individual interviews), the global pandemic added to uncertainties that impeded participation among participants who indicated interested but did not make it to focus groups or individual interviews for various reasons.

Overall, it is worth noting that all rural youth experiences have not been defined by the overall themes and subthemes captured in this study. Despite these limitations, the findings of this study contribute to the TDV literature by providing a better understanding of rural young male experiences with risk and protective factors in rural settings, as well as avenues for help-seeking and help-giving that involve technology-based intervention as an adjunct to standard treatment, especially for traditionally underserved youth.

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APPENDIX

- A. Interview guide
- B. IRB
- C. Email invitation
- D. Waiver of documentation of consent
- E. Figures

APPENDIX A: INTERVIEW GUIDE

FOCUS GROUP AND INDIVIDUAL INTERVIEWS

The purpose of the study is to understand what you think about unhealthy or abusive relationships (what they are? What causes them? And how to prevent them?). I would also ask what you think about using digital tools (like smartphones or social media) to learn about how to make dating relationships safe and healthy.

There are four things I want to tell you before we begin. First -- this is a discussion, it's not like a test, and there are no right or wrong answers. I am here to learn from you. Second, I know that lots of young males have had dating relationships and that in some cases, these might have been unhealthy or abusive. It is important to understand that we aren't asking you to tell us about your own personal or private experiences in this group. If you do have experiences like this and you need someone confidential and safe to talk to, I can offer you some resources to support you. Third, I want to make sure you are comfortable. If I ask questions that you don't want to answer, you don't have to answer them. You are welcome to get up and take a break anytime you need one.

Finally, let's set a few ground rules for our discussion.

- Only one person speaks at a time, be respectful of other people's opinions and their right to speak,
- Everything said here should stay private and not be repeated outside of this group.
- Put your mic on mute when you're not speaking.
- Please make sure you are in a quiet and private location.
- Feel free to add a comment to the chat at any time.
- Ask: Anybody got any additional ground rules they would like to set?

Does everyone agree with these ground rules? I would like to start recording our interview.

Group Introduction [~5 min]:

Before we get started, we'll start with brief introductions. If everyone could say: If you had to delete all but three apps from your phone, which three apps would you keep? You can text it in the chat or just say it.

Question: How did you hear about this study?

Video Vignette [~5 min]

To get us started, we are going to watch a short three-minute video on some types of dating abuse. The idea here is to get us all thinking about this issue. If you feel triggered -- like if this is upsetting to you -- that is OK, and please let me know. It is ok if you want to take a break or discuss your feelings right after the video.

OK, so first, let's talk a little about relationships. Remember, I'm really interested in relationships for teenagers.

Defining Healthy & Unhealthy Relationships

1. So, what's a healthy relationship look like for teenagers?

Prompts, if needed:

- What kinds of actions/behaviors demonstrate a healthy relationship?
- How well do you think most teenagers understand what makes a healthy relationship?

1. What's an unhealthy relationship?
2. *Prompts, if needed:*
 - What kinds of actions/behaviors demonstrate an unhealthy relationship?
 - Slapping, kicking, hitting, punching, shoving? Name-calling? Put-downs? Insults? Making threats?
 - Making someone do sexual things they don't want to do? Trying to get them pregnant? Messing with their birth control? Spreading sexual rumors about them, sharing personal information or photos?
 - Texting all the time with the intent to control, harass, or monitor?
 - Stalking and monitoring partner's whereabouts, location, who they are with?
 - Cyber-bullying: Saying cruel things or posting unwanted photos of a partner online or in message groups? (sending intimidating or threatening messages).
 - What about spying on their partner's phone or email? Hacking accounts or making their partner share their passwords? (Is it normal to share passwords?)
3. With teenagers and young people, who gets abused?

Prompts, if needed:

 - Who gets the worst of it?
 - Can guys be abused? What causes that?
4. What happens to people if they're in an unhealthy or abusive relationship?
 - How does it affect guys?
 - How does an unhealthy relationship affect guys? Do you think the effects are different or the same, how and why?
5. Now that we know what an unhealthy relationship looks like, what do you think causes abusive or violent relationships? Can you give examples?
6. What role does masculinity (or "being a man") play in abusive or violent relationships? Can you explain?
7. How many of us live in a rural area? Or urban area?
 - a. Does living in a rural/urban area (or small community) contribute to abusive relationships? Can you explain how?

Now let's talk a little bit about what we can do about abusive relationships for teenagers.

8. What would most guys do if they were in an abusive relationship? Like what would they do about it?
 - Do you think most young guys would know what to do about it or how to get help?
 - What do you think most guys who abuse would know how to get help? How would they deal with it?
 - Who would they talk to about it? Would they ask for help?
 - Where would they ask for help?
 - What would make a guy ask for help?
9. Keep three apps – if you had to delete all but three apps on your phone, what three will you keep and why?

1. So, we talked about apps a little – we all use them, right? What do you think of the idea of an app for teenagers in unhealthy and abusive relationships?
 - If you were in an unhealthy relationship, would you use an app? Why or why not?
 - What would you want the app to do?
 - What would make you want to use this type of app? (Friends, family, partner? Seeing an ad? Knowing it is anonymous? Wanting to make your relationship better?)
 - What would keep you from using this type of app? What would scare you off? (Friends, family, partner? Someone looking at your phone? Privacy concerns?)
 - Do you think your guy friends would use an app if they were in a bad relationship? Why or why not?

DIGITAL INTERVENTION AND WISHLISTING ACTIVITY

2. Now let's generally talk about what an app might look like:
 - What kind of information/topics would you like to see on this type of app?
 - a. How would you like this content to be available? (Prompts: quizzes, text, comics, figures, web links, videos?)
 - b. What kind of features/functions/specs or do you think would be relevant or useful? Let's make a list. Call out any features/functions/specs you would like to see in this app.
3. What other digital platforms do you think we can use to deliver support for youth in unhealthy or abusive relationships? A website, game console, or smartphone app?
4. Anything else you'd like to tell me, any other advice? Anything else I should have asked you?
5. Name
6. How did you hear about this study?
7. Would you like to do future research studies like this?

APPENDIX B: IRB APPROVAL



Institutional Review Board
University of Missouri-Columbia
FWA Number: 00002876
IRB Registration Numbers: 00000731, 00009014

482 McReynolds Hall
Columbia, MO 65211
573-882-3181
irb@missouri.edu

August 05, 2020

Principal Investigator: Chuka Nestor Emezue
Department: School of Nursing

Your IRB Application to project entitled The Health-e BROS! Study: Acceptability and Implications of Digital Interventions Responding to Dating Violence (DV) Among Rural Young Males (Ages 15-24). was reviewed and approved by the MU Institutional Review Board according to the terms and conditions described below:

IRB Project Number	2024502
IRB Review Number	266346
Funding Source	Sigma Theta Tau ζ Alpha Iota Chapter
Initial Application Approval Date	August 03, 2020
IRB Expiration Date	August 03, 2021
Level of Review	Expedited
Application Status	Approved
Project Status	Active - Open to Enrollment
Expedited Categories	45 CFR 46.110.a(f)(6) 45 CFR 46.110.a(f)(7)
Risk Level	Minimal Risk
Child Category	46.404/50.51
Type of Consent	Consent with Waiver of Documentation Child Assent without Documentation Waiver of Parental Consent
HIPAA Category	No HIPAA

	IRB Approved Consent Document - 18-24 year olds
	IRB Approved Assent Document
	Study protocol_Updated to reflect minor changes - July 24.2020
	Pre-screening survey_Updated to reflect minor changes - July 24.2020
	Email recruitment_Updated to reflect minor changes - July 24.2020
	phone recruitment script v3 - edited to clarify compensation to match all other documents
Approved Documents	parent letter v2 - - edited to clarify compensation and 'dating since age 13' as a requirement to match all other documents
	v2
	Phone pre-screener script v2
	v1 Abuse/harm clarification
	Video describing male-on-female dating abuse
	Video describing female-on-male dating abuse
	list of national dating violence resources v1

The principal investigator (PI) is responsible for all aspects and conduct of this study. The PI must comply with the following conditions of the approval:

1. COVID-19 Specific Information

- Enrollment and study related procedures must remain in compliance with the University of Missouri regulations related to interaction with human participants following guidance at research.missouri.edu/about/covid-19-info.php
 - In addition, any restarting of in-person research activities must comply with the policies and guiding principles provided at research.missouri.edu/about/research-restart.php, including appropriate approvals for return to work authorization for individuals as well as human subject research projects.
2. No subjects may be involved in any study procedure prior to the IRB approval date or after the expiration date.
 3. All unanticipated problems must be reported to the IRB on the Event Report within 5 business days of becoming aware of the problem. Unanticipated problems are defined as events that are unexpected, related or possibly related to the research, and suggests the research places subjects or others at a greater risk of harm than was previously known or recognized. If the unanticipated problem was a death, this is reportable to the IRB within 24 hours on the Death Report.
 4. On-site deaths that are not unanticipated problems must be reported within 5 days of awareness on the Death Report, unless the study is such that you have no way of knowing a death has occurred, or an individual dies more than 30 days after s/he has stopped or completed all study procedures/interventions and required follow-up.
 5. All deviations (non-compliance) must be reported to the IRB on the Event Report within 5 business days of becoming aware of the deviation.
 6. All changes must be IRB approved prior to implementation unless they are intended to reduce immediate risk. All changes must be submitted on the Amendment Form.
 7. All recruitment materials and methods must be approved by the IRB prior to being used.
 8. The project-generated annual report must be submitted to the IRB for review and approval at least 30 days prior to the project expiration date. If the study is complete, the Completion/Withdrawal Form may be submitted in lieu of the annual report.
 9. Securely maintain all research records for a period of seven years from the project completion date or longer depending on the sponsor's record keeping requirements.

10. Utilize the IRB stamped consent documents and other approved research documents located within the document storage section of eCompliance. These documents are highlighted green.

If you are offering subject payments and would like more information about research participant payments, please click here to view the MU Business Policy and Procedure: http://bppm.missouri.edu/chapter2/2_250.html

If you have any questions, please contact the IRB Office at 573-882-3181 or muresearchirb@missouri.edu.

Thank you,
MU Institutional Review Board

APPENDIX C: EMAIL INVITATION

The Health-e BROS! Study: Acceptability & Implications of Digital Interventions Responding to Dating Violence (DV) Among Rural Young Males (Ages 15-24). PI: Chuka Emezue, PhD Candidate

E-mail Recruitment Script

Welcome to the Health-e BROS! Study
[BROS = Better & Healthy Relationship Outcomes Study]

Dear Participant,

Hi. My name is Chuka Emezue and I'm a PhD student at the MU Sinclair School of Nursing. I am looking for young men (age 15-24) who have ever dated someone as volunteers for a research study! If you decide to take part, I'm asking you to do one confidential 60-90-minute phone or video interview. I will give you a \$20 e-gift card to thank you for your time for each focus group or interview you do. Also, I may contact you one last time in about 6 months to ask if you want to participate in one more 60-minute focus group or individual interview where you will receive a \$20 gift card for each meeting.

Study Purpose: I want to learn what young rural men think about unhealthy dating relationships (What are they? Why do they happen? How can we prevent them?) and what they think about using digital tools like smartphones or social media to learn about how to make relationships safe and healthy.

The interviews are **totally confidential**. You don't have to talk about your own relationships or experiences -- I'm here to learn from what you think. There are no right or wrong answers.

Want to find out more? Click here to complete a brief eligibility form: tinyurl.com/healthebro and I'll get back to you as soon as possible if you're eligible.

Feel free to share this email with friends you think might also be interested!

Need more info? email healthebroapps@gmail.com or call/text: (913) 717-9612.

Chuka Emezue
University of Missouri Doctoral Student
Cnec65@umsystem.edu

APPENDIX D: WAIVER OF DOCUMENTATION OF CONSENT

The Health-e BROS! Study: Acceptability & Implications of Digital Interventions Responding to Dating Violence (DV) Among Rural Young Males (Ages 15-24). PI: Chuka Emezue, PhD Candidate

WAIVER OF DOCUMENTATION OF CONSENT

INVESTIGATOR'S NAME: CHUKA NESTOR EMEZUE, PH.D. CANDIDATE (PROJECT #2024502 MU)

Study Title: The Health-e BROS Study: Acceptability and Implications of Digital Interventions Responding to Dating Violence (DV) Among Rural Young Males (Ages 15-24).

1. I would like to ask you to participate in a study that involves research and an interview.
2. I will be reading from a printed form. If there is anything you do not understand as we talk, please ask me to explain.
3. Being in this study is voluntary.
4. For this study, we will ask you to participate in an online focus group and/or a phone interview for approximately 60-90 minutes. A focus group is a group interview that will involve 4-5 young males like you.
5. First, we will ask you some demographic questions such as age, educational level, and gender. Next, we will ask you to share, as much as you are comfortable, your opinion on healthy and unhealthy relationships and to discuss how digital technologies (such as smartphone apps) and social media can help young boys and men who need help in an unhealthy relationship. We will not ask you questions about whether you have any experience with an unhealthy relationship.
6. The purpose of the study is to understand perceived risk and protective factors of dating violence (DV) among young rural male youth ages 15-24; and to identify barriers and opportunities using technology-supported behavioral interventions to prevent dating violence and limit the long-term negative physical and mental health consequences of DV.
7. We are asking approximately 20 young males to participate in focus groups and 10 to participate in interviews. Some participants will be invited to participate in both.
8. We will group participants in one of two age groups (15-17 years and 18-24 years groups).
9. You can choose what questions to answer and can stop participating at any time and will not be penalized for your decision.
10. While on the study, you are at risk for:
 - a. Breach of confidentiality: We do everything we can to protect your privacy in this study, including not collecting identifying data. However, there is still a chance that research data could be seen by someone who shouldn't have access to it, or that someone in the group discussion can share what you said outside the group. If you're concerned by any of these risks, please discuss these with the investigator Chuka Emezue.
 - b. If you are in an abusive relationship and your partner finds out you are taking part in a research study that asks questions about your healthy and unhealthy relationships, this may make them angry and put you at risk for violence. We are careful to protect your privacy in this study, but it is impossible to guarantee that a partner cannot discover you took part in a research study. The safest way to take part in the interview is to make sure you schedule it at a time when you have privacy, with no one else around.
11. We may contact you one last time in about 6 months to ask if you want to participate in one more 60-minute focus group or individual interview, you will be compensated for any focus group/interview you do.
12. If you agree to take part in this study, being in this study may not benefit you directly. However, you may benefit from knowing that you are contributing to scientific knowledge and the opportunity to help other young males in the future and support them.
13. If you choose to participate in the interview, you will be given a study ID number for anonymity rather than any reference to your name being made in the research and associated publications/presentations.

MU: Waiver of Documentation of Consent V1

IRB USE ONLY

Approval Date:

Expiration Date:

14. There is no cost to being in this study. For your time, you will be offered a \$20 e-gift card (Amazon) to be sent to a safe email address of your choice. Also, we may contact you one last time in about 6 months to ask if you want to participate in one more 60-minute focus group or individual interview where they receive a \$20 gift card for each meeting.
15. It is not the policy of the University of Missouri to compensate clinical research subjects in the event the research results in injury. The University of Missouri, in fulfilling its public responsibility, provides medical, professional, and general liability insurance coverage for any injury in the event such injury is caused by the negligence of the University of Missouri, its faculty or staff. The University of Missouri also will provide facilities and medical attention to subjects who suffer injuries while participating in research projects at the University of Missouri.
16. If you have any questions regarding your rights as a participant in this research and/or concerns about the study, or if you feel under any pressure to enroll or to continue to participate in this study, you may contact the University of Missouri Health Sciences Institutional Review Board (which is a group of people who review the research studies to protect participants' rights) at (573) 882-3181.
17. If you have any problems or questions, you may contact Chuka Emezue at (913) 717-9612 or healthebroapps@gmail.com
18. I would be happy to answer any questions you have.
19. I can email you a copy of this informed consent document if you would like a copy and if it safe for you to have a copy.

APPENDIX E: SCREENSHOTS OF ONLINE RECRUITMENT

The image displays four screenshots of online recruitment posts for a research study by moteenhealth. The posts are arranged in a grid-like fashion, showing different views of the same advertisement.

- Top Left:** A Facebook post from moteenhealth. The text reads: "Calling on young males (age 15-24) to be part of a research study to help develop an app for healthy relationships. You will be ... See More". Below the text is a video player showing three young men standing on a beach at sunset. At the bottom, it says "MISSOURI QUALTRICS.COM" and "Calling on young males (age 15-24) to be part of a...". There are 6 likes and 1 share.
- Top Middle:** A Facebook post from moteenhealth. The text reads: "Calling on young males (age 15-24) to be part of a research study on youth relationships and...". Below the text is a video player showing a young man in a blue football uniform. At the bottom, it says "Calling on young males (age 15-24) to be part of a research study to...". There is a "Learn More" button.
- Top Right:** An Instagram post from moteenhealth. The text reads: "Calling on young males (age 15-24) to be part of a research study to help develop an app...". Below the text is a video player showing a young man in a dark jacket looking up. At the bottom, it says "moteenhealth Calling on young males (age 15-24) to be part of a research study to help develop an app...". There is a "Learn More" button.
- Bottom Right:** An Instagram post from moteenhealth. The text reads: "Calling on young males (age 15-24) to be part of a research study to help develop an app for...". Below the text is a video player showing a group of young men in blue football uniforms on a field. At the bottom, it says "moteenhealth Calling on young males (age 15-24) to be part of a research study to help develop an app for...". There is a "Learn More" button.

APPENDIX F: SAFETY PROTOCOL

The Health-e BROS! Study: Acceptability & Implications of Digital Interventions Responding to Dating Violence (DV) Among Rural Young Males (Ages 15-24). PI: Chuka Emezue, PhD Candidate

Safety protocols (what if a participant discloses abuse)

Measures to protect the study participant will follow the guidelines set forth by the Nursing Research Consortium on Violence and Abuse (NRCVA). If a participant discloses that they are currently experiencing dating abuse, The PI is trained to assess for immediate danger including the following items and follow the procedures:

1. Is the participant in immediate danger?
2. Where is the abusive partner or abuser now?
3. Does that abusive partner or abuser have access to a weapon?
4. Where will the abusive partner or abuser be when the participant is finished with the interview focus group/contact?

If a participant is afraid for their safety, they will be assisted in contacting resources in the area or the police if needed. The PI may serve as liaison between participants and community health and social services if a participant so desires. All participants, regardless of disclosure, will receive a list of local and national teen DV resources (see attached), and if there is a disclosure, research staff will offer the participant a “warm hand-off” referral, meaning the research staff can make the first contact with the resource and then hand the participant to a service provider.

Additional procedures will be in place for phone/email contacts with participants. When contact is made, the PI will follow a prepared script identifying himself as a doctoral student at the MU Sinclair School of Nursing calling to follow-up on health services and ask to speak with the participant. When the participant answers, they will always be asked if it is safe time to talk (“Is this a quiet, safe and private time to talk?”) before proceeding with the assessment. The participant will also be given a phone number and instructed that they can hang up at any time during the call without explanation and can call back when it is safe to resume. The participant will also be given the code phrase, “I’m sorry I have to go now” that they can use to terminate the call if needed. If that code is used or if the PI is concerned about safety (due to suspicious sounds or other cues), the PI is trained to assess for immediate safety as follows:

1. Are you in danger right now?
2. Is someone making you feel unsafe?
3. Is that person in the room?
4. Does the person have a weapon?
5. Do you want me to call the police to come to your location now?

If the participant says yes, the PI says “I will now call the police on another line and instruct them to go to your location. Once I have spoken with them I will get right back on the line with you and stay on the line with you until the police arrive.” If a participant says no (does not want the police called), the PI says, “Do you want me to stay on the line?” If the participant says yes, the PI says, “You can hang up at any time. If you do, do you want me to call you back in 30 minutes to check to see if everything is ok?” If yes, the PI does so 30 minutes after the person hangs up. When the PI calls back, he opens the interview with the standard checking to see if this is a safe time to call and asks again about calling the police. If the participant wants the PI to stay on the line, the PI then reads from a prepared “dummy script” about satisfaction with health care (in case an abusive partner is on the other line or within distance of hearing the conversation) until the participant either indicates they wish to resume or hangs up and then the PI

waits until the participant re-establishes contact. These safety procedures have been used successfully in previous research studies, and to date, the protocols have been effective, as we have not had any reported adverse events by participants that their participation has resulted in further danger.

The PI may call upon his dissertation committee members if ever worried about how to proceed in an individual case. The dissertation committee has extensive experience providing care and consulting on teen DV cases. Dr. Bullock, Bloom, and Enriquez are registered nurses with extensive clinical care in the emergency department and community clinical settings with survivors of DV. They worked extensively with domestic violence shelters for decades and have significant experience with the physical and mental health consequences of DV.

Should the PI discover child abuse or neglect, intent to harm self, or intent to harm others during study participation as defined by current state law, a report to the appropriate agency in each state will be made following all mandatory reporting state laws.

VITA

Chuka Nestor Emezue was born in Jos, Plateau State, Nigeria. He completed his elementary, secondary, and high school education in Nigeria and earned his bachelor's degree in Biochemistry from the Niger Delta University, College of Health Sciences in Wilberforce Island, Bayelsa State, Nigeria. After his bachelor's degree, he led several community-based projects in Abuja, Nigeria, distributing insecticide-treated bed nets, fundraising for an orphanage, led a tree-planting project, and a volunteer teacher for a K-12 primary school under the aegis of the National Youth Service Corp and the UN Millennium Development Goals (MDG).

In 2016, he completed a Master of Public Health from the MU School of Health Professions and a Master of Public Affairs from the MU Harry S. Truman School of Public Affairs (TSPA). In the MPH program, he was inducted into the Delta Omega National Public Health Honorary Society, Gamma Eta Chapter. He was also a Dean's Finalist for the Governor Mel Carnahan Graduate Award.

In May 2021, Emezue completed his Ph.D. in Nursing from the University of Missouri Sinclair School of Nursing (MUSSON). He has served as a graduate teaching and research assistant, student-faculty liaison, and Charles and Josie Sinclair Fellow at the Sinclair School of Nursing and was inducted into the Sigma Theta Tau International Honor Society of Nursing, Alpha Iota Chapter (serving as its Publicity Chair). He was nominated for the Outstanding Graduate Student Teaching Award and Ph.D. Student Award for Excellence at the Sinclair School of Nursing.

Emezue was an active member of other MU student organizations holding various roles on executive boards. He served on the boards of the Africa Graduate and Professional Student Association (AGPSA; where he was given the African Leadership Award), Graduate and Professional Council (GPC), UNICEF Campus Initiative Mizzou, MPH Grad. Student's Association (MPHGSA) and was the Vice President of the Master of Public Health Alumni Association (MPHAS). He was also a two-time executive secretary of the now-defunct Graduate Student Association (GSA) – a grad

student government board. His passion for the Mizzou community led him to found the MU Deaton Scholars Program (DSP) as its first coordinator in 2016 under the leadership of Chancellor Brady J. Deaton (Emeritus) and Dr. Anne Deaton. Now in its 5th year and under new leadership, the peer mentorship program has assembled over 400+ MU undergraduate and graduate students leading community-based projects supported by small seed grants. He also represented the university at several conferences and was a delegation to the Presidents United to Fight Hunger (PUSH) and Universities Fighting World Hunger (UFWH) programs in Maine.

The same drive led him to organize two passion projects, including the second-ever TEDx summit at Mizzou (2016) and the Mizzou Passion Project (MPP) that celebrated MU faculty, staff, and administrators whose body of work incorporated canons of inclusion, diversity, and equity for sexual and racial minority students. Recently, Emezue was inducted into the MU Cambio Fellowship, inducted into the prestigious Rollins Society, and nominated as a 2021 Mizzou 18 scholar. Emezue's research interests center on two co-occurring issues: partner violence and substance use. He speaks two languages — Igbo and English, enjoys photography, grooming indoor plants, and creative writing. He also enjoys cooking for his lovely wife, Kyla, who is also an MU grad student.