
BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME: Halpern, Carolyn T.

eRA COMMONS USER NAME (credential, e.g., agency login): carolyn_halpern

POSITION TITLE: Professor and Chair, Maternal and Child Health

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)

INSTITUTION AND LOCATION	DEGREE (if applicable)	Completion Date MM/YYYY	FIELD OF STUDY
University of Houston	B.S.	05/1976	Psychology
University of Houston	M.A.	05/1979	Developmental Psychology
University of Houston	Ph.D.	05/1982	Developmental Psychology

A. Personal Statement

Halpern is Professor and Chair of the Department of Maternal and Child Health (MCH) in the Gillings School of Global Public Health. She is a Faculty Fellow at the Carolina Population Center and at the Frank Porter Graham Child Development Institute, both at the University of North Carolina at Chapel Hill. She is a developmental psychologist and was the Deputy Director/co-investigator of the Waves IV and V National Longitudinal Study of Adolescent to Adult Health (Add Health) program projects. Before her work on the Add Health project, she directed two US-based longitudinal studies examining biopsychosocial changes and their implications for adolescent development. Halpern's research interests center on improving understanding of biosocial contributors to healthy development and the implications of adolescent experiences for developmental and demographic processes well into adulthood. She is currently co-PI of an NICHD/NIMHD funded R01 [Sexual Orientation, Gender, Socioeconomic Status, and Health Across the Life Course] that will collect, analyze, and disseminate new information from a subset of the Add Health sample on developmental milestones related to sexual orientation and gender identity, and chronic socioeconomic stressors that contribute to health disparities of sexual and gender minorities. Halpern has more than 30 years of research experience in both U.S. and global settings, and 170 peer-reviewed publications on these topics. In addition to survey development, she has experience and expertise in biomarker collection and interpretation, longitudinal methods, and life course approaches to health and development. Halpern has received multiple University and external awards for mentoring. She has/is directing 24 doctoral dissertations and 31 master's papers, and has mentored 11 post-docs and 9 undergraduates, facilitating successful student and postdoctoral fellow transitions to research positions in academic and other institutional settings. She has also served as a member of 56 doctoral committees, and faculty mentor for 28 competitive student fellowships and awards (excluding T32 support for students), in addition to extensive mentoring of junior faculty. For 2011 – 2016 she was the PI of the Carolina Population Center's Population Science T32 training grant (T32HD007168).

1. Hargrove TW, Halpern CT, Gaydosh L, Hussey JM, Whitsel EA, Dole N, Hummer RA, Harris KM. Race/Ethnicity, Gender, and Trajectories of Depressive Symptoms Across Early- and Mid-Life Among the Add Health Cohort. *Journal of Racial and Ethnic Health Disparities*. 2020; 7:619-629. <https://doi.org/10.1007/s40615-019-00692-8>
2. Kahn NK, Halpern CT. Is developmental change in gender typed behavior associated with adult sexual orientation? *Developmental Psychology*. 2019;55(4):855–865. <http://dx.doi.org/10.1037/dev0000662>
3. Harris KM, Halpern CT, Whitsel EA, Hussey JM, Killeya-Jones LA, Tabor J, Dean SC. Cohort profile: The National Longitudinal Study of Adolescent to Adult Health (Add Health). *International Journal of Epidemiology*. 2019;48(5):1415–1415k, doi: 10.1093/ije/dyz115.
4. Goldberg SK, Conron KJ, Halpern CT. Metabolic syndrome and economic strain among sexual minority young adults. *LGBT Health*. 2019;6(1):1-8. <https://doi.org/10.1089/lgbt.2018.0053>.

Ongoing and recently completed projects that I would like to highlight include:

1U01AG071448 (Hummer)

03/01/21-12/31/25

NIH/NIA

National Longitudinal Study of Adolescent to Adult (Add Health): Wave VI Core Project

Role: Co-Investigator

R49/CE003092 (Marshall)

08/01/19-07/31/24

Centers for Disease Control and Prevention

UNC-CH Injury Prevention Research Center: Patterns of Intimate Partner Violence from Adolescence into Adulthood among sexual minorities and heterosexuals. Project #1 in Injury Prevention and Control Research and State and Community Based Programs.

Role: Project 1 Principal Investigator

R01AG061437-01A1 (Handa)

NIH/NIA

09/15/2019-04/30/24

The effect of poverty, stress and immune function on health during the life course

Role: Co-investigator

R01HD087365-01A1 (Halpern)

09/21/17-05/31/23

NIH/NICHD/NIMHD

Sexual Orientation/Gender Identity, Socioeconomic Status, and Health Across the Life Course

Role: Co-Principal Investigator

P01HD031921 (Harris)

11/01/06-04/30/20

NIH/NICHD

The National Longitudinal Study of Adolescent Health: Wave V

Role: Co-Investigator/Principal Investigator of subproject

B. Positions, Scientific Appointments, and Honors

Positions and Scientific Appointments

2017- Faculty Fellow, Frank Porter Graham Child Development Institute, UNC-CH

2017-2021 Standing Member, NIH CIHB - Community Influences on Health Behavior Study Section

2016- Member Data and Safety Monitoring Board (DSMB) for NIDDK funded clinical consortium: Adolescent Bariatrics: Assessing Health Benefits and Risks (Teen-LABS) Study

2015- Chair, Department of Maternal and Child Health, Gillings School of Global Public Health

2015- Associate Editor for Public Health and Policy, *Journal of Adolescent Health*

2014-15 Interim Chair, Department of Maternal and Child Health, Gillings School of Global Public Health

2014-2015 Invited member, NICHD Contraceptive Research Review Panel

2013-2019 Member, Board of Directors, Sexual Health Initiatives for Teens, North Carolina (SHIFT NC)

2013-2015 Associate Editor, *Journal of Research on Adolescence*

2013 Senior Scholar/Mentor, Society for Research on Adolescence – European Association for Research on Adolescence Summer School, Kent State University

2011- Professor, Tenured, Department of Maternal and Child Health, Gillings School of Global Public Health, UNC-CH

2010- Member, Association of Teachers of Maternal and Child Health

2007- Member, Delta Omega, Honorary Public Health Society

2004-11 Associate Professor, Tenured, Department of Maternal and Child Health, Gillings School of Global Public Health, UNC-CH

2000-19 Faculty Fellow, Center for Developmental Science, UNC-CH

1999- Member, Society for Adolescent Health and Medicine

1998- Faculty Fellow, Carolina Population Center, UNC-CH

1998-2004 Assistant Professor, Tenure-track, Department of Maternal and Child Health, Gillings School of Global Public Health, UNC-CH

1998- Member, American Public Health Association

1994- Member, Society for Research on Adolescence

1993- Member, Population Association of America

- 1986-98 Project Director/Research Associate, Carolina Population Center, University of North Carolina at Chapel Hill (UNC-CH)
- 1983-85 Statistician/Research Associate, Governor's Office, N.C. Office of State Budget and Management, Research and Planning Services, Raleigh, NC
- 1982 Supervisor of Psychological Testing/Test Administrator, Kelsey-Seybold Clinic, P.A., Houston, TX. Project: United States Air Force Health Survey (Agent Orange Study), Wave I

Honors

- 2009 Recipient Graduate School Faculty Award for Excellence in Doctoral Mentoring, UNC-CH
- 2010 Recipient National Association of Teachers of Maternal and Child Health Loretta Lacey Academic Leadership Award
- 2016 Recipient John E. Larsh Jr. Student Mentorship Award, Gillings School of Global Public Health, UNC-CH, 2016

C. Contributions to Science

1. Halpern's early research focused on the hormonal underpinnings of pubertal change and how the interactions of physical, psychological, and social changes contribute to adolescent sexual initiation and behavior. As part of this work, her publications examined methodological issues related to technology changes in hormone assays and issues of repeated questionnaire administration. Using smaller-scale longitudinal studies with intensive schedules of surveys, psychological and physical assessment, and biospecimen collection, publications from these projects demonstrated significant but modest contributions of pubertal testosterone changes to sexual behavior in both males and females, contributions that were tempered by social experience such as religious attendance. These findings constituted early support for the utility of biosocial/systems approaches to developmental and health issues, approaches that have now become the standard for much research in public health and the developmental sciences.

- a. Halpern CT, Udry JR. Variation in adolescent hormone measures and implications for behavioral research. *Journal of Research on Adolescence* 1992;2(2):103-122.
- b. Halpern CT, Udry JR, Campbell B, Suchindran C, Mason GA. Testosterone and religiosity as predictors of sexual attitudes and activity among adolescent males: A biosocial model. *Journal of Biosocial Science* 1994;26:217-234.
- c. Halpern CT, Udry JR, Suchindran C. Effects of repeated questionnaire administration in longitudinal studies of adolescent males' sexual behavior. *Archives of Sexual Behavior* 1994;23(1):41-57.
- d. Halpern CT, Udry JR, Campbell B, Suchindran C. Effects of body fat on weight concerns, dating, and sexual activity: A longitudinal analysis of black and white adolescent females. *Developmental Psychology* 1999;35:721-736.

2. Building on this early work, Halpern used a variety of data sets and expanded the range of biomarkers to further understanding of biopsychosocial models of sexual development and romantic relationships. The expansions included the addition of genetic factors to explanatory models, exploration of the intersections between sexual behavior and intimate violence, and examination of potential bidirectional relationships between risk-taking and depressive symptoms. Much of this work is based on data from Add Health. The contributions of these publications include first national estimates of intimate partner violence in heterosexual and same-sex adolescent couples, demonstrated linkages between sexual activity and violence within adolescent romantic partnerships, and evidence to support a pathway from risk taking to depressive symptoms rather than support for risk taking as "self-medication" for depression.

- a. Halpern CT, Oslak SG, Young ML, Martin SL, Kupper L. Partner violence among adolescents in opposite-sex romantic relationships: Findings from the National Longitudinal Study of Adolescent Health. *American Journal of Public Health* 2001;91:1679-1685. PMID: PMC1446854.
- b. Kaestle CE, Halpern CT. Sexual intercourse precedes partner violence in adolescent romantic relationships. *Journal of Adolescent Health* 2005;36:386-392.
- c. Hallfors DD, Waller MW, Bauer D, Ford CA, Halpern CT. Which comes first in adolescence: Sex and drugs or depression? *American Journal of Preventive Medicine* 2005;29:163-170.
- d. Halpern CT, Kaestle CE, Guo G, Hallfors DD. Gene-environment contributions to young adult sexual partnering. *Archives of Sexual Behavior* 2007;36:543-554.

3. In a previous NICHD funded project, Halpern and her team examined more comprehensive sexual initiation patterns among youth, and the implications of those patterns for later sexual behavior and sexual health. They

identified a typology of initiation patterns characterized by differences in aspects such as timing of initiation, sequence of behavioral initiation (e.g., vaginal or oral sex first), and pace of behavioral exploration. These patterns are linked to health outcomes. For example, adolescents who initiate oral-genital sex first, and wait at least a year before initiating vaginal sex, have significantly lower odds of teen pregnancy. Halpern's team has also examined contributors to sexual inexperience well into adulthood.

- a. Halpern CT, Haydon A. Sexual timetables for oral-genital, vaginal, and anal sex: Sociodemographic comparisons in a nationally representative sample. *American Journal of Public Health* 2012; 102(6):1221-8. PMID: PMC3394539.
- b. Reese B, Haydon AA, Herring AH, Halpern CT. The association between sequences of sexual initiation and the likelihood of teen pregnancy. *Journal of Adolescent Health* 2013;52(2):228-233. PMID: PMC3551538.
- c. Haydon A, Herring A, Halpern CT. The association between patterns of emerging sexual behavior and reproductive health in young adulthood. *Perspectives on Sexual and Reproductive Health*. 2012;44(4):218-227. PMID: PMC3531866.
- d. Haydon AA, Cheng MM, Herring AH, McRee AL, Halpern CT. Prevalence and predictors of sexual inexperience in adulthood. *Archives of Sexual Behavior* 2014;43(2):221-230. PMID: PMC3947171

4. Halpern's research team has capitalized on the sexual minority sample in Add Health, demonstrating that health disparities among sexual minorities during adolescence persist into adulthood, are numerous, and are particularly pronounced among women. Halpern, as co-PI, received R01 funding that supported additional data collection from the Add Health sample to understand socioeconomic contributors to health disparities documented in the Add Health sexual and gender minority sample.

- a. Goldberg S, Strutz KL, Herring AA, Halpern CT. Risk of substance abuse and dependence among young adult sexual minorities, utilizing a multidimensional measure of sexual orientation. *Public Health Reports* 2013;128(3):144-52. PMID: PMC3610066.
- b. Strutz KL, Herring AH, Halpern CT. Health disparities among young adult sexual minorities in the U.S. *American Journal of Preventive Medicine* 2015;48(1):76-88. PMID: PMC4274226.
- c. Conron KJ, Goldberg S, Halpern C. Sexual orientation and sex differences in socioeconomic status: A population-based investigation in the National Longitudinal Study of Adolescent to Adult Health. *Journal of Epidemiology and Community Health*. Doi:10.1136/jech-2017-209860.

5. Halpern has also made contributions related to adolescent health on the global stage. She co-directed an early study in Kenya and Brazil examining the potential benefits of web-based education in reproductive health in low resource settings, finding that despite technology's attractiveness to youth, they will not necessarily use it as a source of health information; context must be considered in designing interventions. Halpern has also collaborated on studies evaluating the effectiveness of structural interventions (e.g., school support, cash transfer programs) in improving adolescent sexual health and general well-being.

- a. Halpern CT, Mitchell EMH, Farhat T, Bardsley P. Effectiveness of web-based education on Kenyan and Brazilian adolescents' knowledge about HIV/AIDS, abortion law, and emergency contraception: Findings from TeenWeb. *Social Science and Medicine* 2008;67:628-637. <http://dx.doi.org/10.1016/j.socscimed.2008.05.001>.
- b. Hallfors DD, Cho H, Rusakaniko S, Iritani B, Mapfumo J, Halpern CT. Supporting orphan girls to stay in school as HIV prevention: Evidence from a randomized control trial in rural Zimbabwe. *American Journal of Public Health* 2011;101(6):1082-1088. PMID: PMC3093274 (An AJPH paper of the year)
- c. Handa S, Halpern CT, Pettifor A, Thirumurthy H. The Government of Kenya's Cash Transfer Program reduces the risk of sexual debut among young people age 15-25. *PLoS ONE* 2014;9(1): e85473. PMID: PMC3893206.

Complete List of Published Work in MyBibliography:

<https://www.ncbi.nlm.nih.gov/pubmed/?term=carolyn+halpern>