

I have dedicated my past 4 years to behavioral research in public health, particularly related to substance use prevention and control. My academic and research experience to date has motivated my devotion to a research career in behavioral science addressing the range of socio-structural determinants of substance use, leveraging health education and health communication as key strategies, with the goal of prevention and control, especially among youth.

My master's training in health education and health communication at Johns Hopkins University established my foundation for a research career and solidified my interest in this area, particularly with regard to tobacco industry marketing and its impact on youth. For example, I contributed and/or led studies investigating the features of tobacco product labeling and advertising, as well as tobacco marketing exposure and related perceptions among Chinese high school students. Our findings have informed educational and regulatory efforts to protect youth from tobacco-related hazards. As a master's student, I also became a Certified Health Education Specialist (CHES, per the National Commission for Health Education, ID# 37161, exp: 03/31/27).

I chose George Washington University for my PhD training in social and behavioral sciences to build upon this prior research by expanding my methodological, theoretical, and content area expertise. I work with Dr. Carla Berg who has a portfolio of research that includes domestic and international research on tobacco and cannabis use and related policies and industry influences, using various approaches including naturalistic observations, cohort studies, mixed methods designs, intervention studies, and dissemination and implementation science. I have been involved in several studies with Dr. Berg's team, particularly as they relate to youth and disproportionately-impacted populations (e.g., racial/ethnic minorities, sexual/gender minorities). I am working on a NIH-funded study focused on a newer product (IQOS, a heated tobacco product) and its regulation and marketing in the US and Israel. Our published work showed that this product's marketing targets youth via "pop culture" media channels and clusters its retailers near schools, despite the industry's claims that it exclusively targets adult cigarette users and its own research suggesting positive population impact – factors that were key in the US FDA authorization for this product to use 'reduced exposure' marketing claims. These findings have been crucial in advancing the evidence base informing the US FDA's tobacco regulatory efforts. Using data from this study, I led a paper on a separate but related topic – theoretical predictors of cannabis use among US and Israeli adults – in order to facilitate future collaborations on this topic.

I am also playing a key role on another NIH-funded study focused on cannabis regulation and marketing in the US. Our published work documented that cannabis retailers in 5 US cities (Denver, Seattle, Portland, Las Vegas, Los Angeles) showed evidence of targeting youth (e.g., youth-oriented signage and product packaging). We also showed that social media platforms have weak policies regarding cannabis promotion and sales. Youth have high levels of marketing exposure via retailers and online, which promote more positive perceptions toward tobacco and cannabis. Thus, our findings are crucial to inform regulatory, enforcement, and prevention efforts.

I am also involved in an NIH-funded study to disseminate and implement an evidence-based smoke-free home intervention in Armenia and Georgia, two middle-income countries with high smoking prevalence that recently implemented national public smoke-free policies. Through leveraging their national quitlines and local coalitions to deliver this intervention, the goal is to reduce secondhand smoke exposure and shift social norms to ultimately protect youth.

As evidence of my commitment, I have 12 peer-reviewed publications (3 first-authored; additional 8 articles under review) and have presented study findings via 5 abstracts at scientific conferences (e.g., Society for Research on Nicotine and Tobacco, Research Society on Marijuana) in the past years. I also have one abstract accepted for oral presentation in the upcoming annual

meeting of Society of Behavioral Medicine. I am actively involved in these national organizations and scientific centers in my home institution (e.g., GW Cancer Center) to ensure that I stay abreast of the state of the science and contribute to research translation to optimize impact. With the experiences and skills I gained through my training – and support from FAHE, I will devote my career to conducting cutting-edge public health research to inform effective substance use prevention and control practices, including policies as well as health education and communication programs to prevent youth substance use.