

Treatment Network Member Spotlight..... **Monica Webb Hooper, Ph.D.**

Dr. Monica Webb Hooper is Deputy Director of the National Institute on Minority Health and Health Disparities (NIMHD). She works closely with the Director, Dr. Pérez-Stable, and the leadership, to oversee all aspects of the institute and to support the implementation of the science visioning recommendations to improve minority health, reduce health disparities, and promote health equity. Dr. Webb Hooper is an internationally recognized translational behavioral scientist and clinical health psychologist. She has dedicated her career to the scientific study of minority health and racial/ethnic disparities, focusing on chronic illness prevention and health behavior change. In her academic positions, her program of community engaged research focused

respects, as I remain an active consumer of the literature, help to develop and identify cutting edge scientific ideas, and have many collaborations. There are also many differences. I am now a federal official and civil servant with a national view of the landscape from the NIH perspective, and the ability to have a direct impact on the minority health and health disparities scientific agenda – I did not expect a role of this magnitude at this stage in my career! I have always believed that my areas of scientific inquiry, and those of health disparities and equity researchers across the country are hugely important. However, this work is often under-appreciated relative to other fields of study. And as challenging as the current times are, the *collision* of the pandemic and longstanding systemic inequities has made health disparities part of the national conversation. NIMHD has more scientific visibility than perhaps ever before. It's an unparalleled honor and responsibility for me.

2. What do you view as the main challenges for your field? From your perspective, what do you view will be the next biggest breakthrough(s)?

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development and execution of randomized intervention studies for both my thesis and dissertation were perhaps my most valuable experiences as a doctoral student. While it would have been more time-efficient to utilize existing data and conduct interesting secondary analyses, the opportunity to conduct independent research, engage my peers in the lab as collaborators, "hire" undergraduate research assistants to work on the studies, and to think through and troubleshoot the challenges of study design, community recruitment and retention, data collection, analysis, interpretation, reporting, and dissemination was everything. And because I went directly from being a graduate trainee and clinical intern to a faculty position, having these skills allowed me to start my own lab right away. I followed the same model as my own (a)-3.3 (6114.1 (l)7.6 (l)-22.1 (1fTh(tu)-5. (ta)-8.3 (n)-5.8 (k)-6.004 Tc -0.(m)00M01(a)-3.