Dear colleagues, collaborators, partners, and friends,

I hope this message finds you safe and healthy. What a colossal change our world has experienced since the fall newsletter! You have no doubt been impacted in countless ways by the coronavirus pandemic, both personally and professionally. As you’ll see below, our center faculty, students, and staff have risen to the challenge of having to work remotely. In-person research activities are currently on hold at our institution; many of us are missing those face-to-face connections but have found ways to engage with participants at a distance, perhaps at a time when psychosocial or behavioral support is most needed. It is fascinating to consider the ways in which the very phenomena we study may be heightened (or diminished) at this time. The science of behavior change, moreover, could not be more critical. We thought promoting physical activity was challenging. Now add mask-wearing to the list of health promoting and disease preventing behaviors!

A sign outside my office door (which I haven’t seen in quite a while) reads *science, not silence.* I am immensely thankful for the epidemiologists and infectious disease specialists using their voices to inform public policy and understanding in light of the pandemic. We know, though, that there is more to public health than infection control and disease prevention. Per the CDC, exposure is defined as “having come into contact with a cause of, or possessing a characteristic that is a determinant of, a particular health problem.” We can therefore think about exposure not just in reference to a virus or toxin but also in reference to race, ethnicity, neighborhood and other sociodemographic characteristics that may confer health risk. Recent events bring to even greater light the historic and continued racial injustices experienced by Black Americans and provide an opportunity for listening, learning, and action. As educators, nurses and other care providers, behavioral scientists, and health services researchers, we are in a unique position to be part of this transformation. Indeed, the research programs led by many of our faculty and affiliates have long focused on social determinants of health and community-informed ways to enhance well-being for those at risk. I encourage us to reflect and redouble our commitment to the design aspirations outlined by ASU president Michael Crow in his book titled *Designing the New American University,* e.g., to enable student success, to be socially embedded, and to transform society. Let these principles continue to guide us in big and small ways to ensure health and social equity among our students and the communities we serve.

My tenure as interim director ends 06.30.20. Sincerest thanks for the opportunity to support the center in this capacity. Highlights have included a workshop on adaptive interventions led by Dr. Billie Nahum-Shani of the University of Michigan, a journal club session with ASU’s Center for Innovation in Healthy and Resilient Aging, and a fall fitness event for students, staff, and faculty on the downtown campus. We had been oh-so looking forward to hosting a panel on recruiting, engaging, and retaining underserved and vulnerable populations to research at the annual meeting of the Society of Behavioral Medicine but alas, the conference was canceled due to COVID-19. On the bright side, an associated manuscript is in the works. Stay tuned!

*Shelby Langer, PhD*