



RPB MEDICAL STUDENT EYE RESEARCH FELLOWSHIP

2025 Guidelines and Instructions

DEADLINES*

Nomination Form: December 15, 2024, for January 2025 deadline
June 15, 2025, for July 2025 deadline

Application: January 10, 2025 (awarded in June)
July 1, 2025 (awarded in December)

**If the deadline falls on a weekend or holiday, the deadline is the following business day.*

DESCRIPTION

Research to Prevent Blindness (RPB) will fund several Medical Student Eye Research Fellowships (MSF) at \$30,000 each. RPB will partner with the American Osteopathic Colleges of Ophthalmology & Otolaryngology-Head and Neck Surgery Foundation (AOCOO-HNS) to offer one (1) award specifically targeted to a student of osteopathic medicine. The remaining MSFs, targeted to students of allopathic medicine, will not have a specific discipline criteria or scientific focus and will be open to any topic within vision research; we encourage projects that incorporate artificial intelligence and/or data science. For all MSFs, we particularly encourage individuals who identify as female and/or an under-represented minority to apply to bring much needed equity and diversity to the field of vision research.

- **The RPB / AOCOO-HNS Foundation Medical Student Eye Research Fellowship for a Student of Osteopathic Medicine** will offer one (1) MSF specifically targeted to a student of osteopathic medicine and open to any topic in vision research within an RPB-supported department of ophthalmology. Open to students of osteopathic medicine (SOM) only.
- **The RPB Medical Student Eye Research Fellowship** will not have a specific discipline criteria or scientific focus and is open to any topic in vision research within an RPB-supported department of ophthalmology. Open to students of allopathic medicine (MD) only.

A portion of the fellowship should finance the recipient's eye research activities. Up to an additional \$8,000 will be provided for students who must relocate at least an hour away from their allopathic or osteopathic medical school location to another school for the fellowship. (Distribution of these additional funds is at the discretion of RPB.) Candidates must be prepared to devote all their time to the proposed research project during the fellowship.

The training and/or project should merit support, not just provide a technician within the department. Mentors should carefully consider the research project and its objectives as well as the role of and outcomes for the student within the project, as they will be required to include this information in the submission.

All RPB grants must remain free of institutional overhead and indirect costs. The Medical Student Fellowship is not transferable to another individual or institution. Should the student or the mentor leave the department of ophthalmology, the department must return any unspent funds. Any equipment purchased with RPB funds is the property of the Department of Ophthalmology.

ELIGIBILITY

- RPB-supported Chairs may nominate two candidates – one student of allopathic medicine and one student of osteopathic medicine -- prior to their third or fourth year of allopathic or osteopathic medical school. Interim or acting Chairs cannot nominate candidates for this award. Candidates must be either US citizens or permanent residents by the application deadline. MD/PhD students and previous recipients of this award are ineligible.
- The primary mentor's full-time primary appointment must be in ophthalmology. Part-time or adjunct ophthalmology faculty may not be primary mentors.

REPORTING AND ADDITIONAL REQUIREMENTS

All reporting requirements relate to research conducted with the Medical Student Fellowship:

- Summary report (annually, due each November while the award is active).
- Bibliography (annually, due each January while the award is active).
- Photo (one-time, due first January).
- Financial report (annually, due each January while the award is active).
- Final report (one-time, due six months after the award is expended).

The RPB / AOCOO-HNS Foundation Medical Student Eye Research Fellowship for a Student of Osteopathic Medicine recipient is required to:

- Become a (free) member of the American Osteopathic College of Ophthalmology & Otolaryngology (AOCOO).
- Present their research at the AOCOO Annual Clinical Assembly.
- Offer mentorship to other students of osteopathic medicine.

If awarded, information on fulfilling the above requirements will be sent under separate cover. Failure to properly report and credit research funded by RPB and/or American Osteopathic Colleges of Ophthalmology & Otolaryngology – Head and Neck Surgery Foundation places the grant at risk for termination.

NOMINATION FORM AND APPLICATION SUBMISSION

Nomination Form: Nomination forms are a requirement. **For the January 10 application deadline, nomination forms are due no later than December 15; for the July 1 application deadline, nomination forms are due no later than June 15. Applications received without a prior nomination form will not be accepted.** Complete the nomination form and email to MariaClaudia Lora-Montano at mlora@rpbusa.org. Nomination forms should be sent as Word documents only.

Note. The email subject of the **nomination form** should include **MSF Nomination – Candidate Last Name**

Application: RPB will accept applications and *most* supporting documentation via the password-protected page on RPB's website that has been established for application submission. Please note only one (1) upload action, with application and all applicable supporting documentation, will be accepted per candidate. This upload must be received **no later than 11:59pm ET on the deadline date.**

- Go to www.rpbusa.org to log in.
- Enter the password: **Research** (not case sensitive)
- Click on the "Upload Grant Application" button to go to the upload form.
- Once you are on the upload form, enter your email address in the "From email" field.
- Upload your application and supporting documentation by browsing for them on your computer using the "Browse" button on the form.
- Use the Message box to add additional information, if any.
- Before clicking "SendThisFile" to send your submission, check that the information is complete.
- Click the "SendThisFile" button to send your application and supporting documentation.

DOCUMENTATION SUBMISSION

The single upload action must include **only** three (3) separate documents:

1. Signed, completed application form, in PDF.
2. Signed, completed application form, in **Word – make sure all signatures are included!**
3. Supporting documentation: As a single PDF (not a PDF portfolio), the third document must include the below documents **in this order**:
 - a. The **student's CV**, in PDF; limit two (2) pages.
 - b. **Primary mentor's NIH-style biosketch**, in PDF; limit five (5) pages. Mentor must adhere to current NIH format and instructions.
 - c. The **Chair's statement** on the value of the research fellowship to the department and the student and the strength of the mentor's proposed research and objectives. Statement must be on letterhead, signed, in PDF, and addressed to "RPB Review Committees." Limit to three (3) pages and font size 10-point or higher.

DOCUMENTATION SUBMISSION *continued*

- d. The **student's statement**, in PDF, describing how and why his/her interest in eye research developed, personal involvement to date if any, explanation and purpose of proposed research (include why you are doing this project and what is the rationale for the research) and his/her role and approach in the proposed research, and impact expected on future career opportunities. One-page limit and font size 10-point or higher.
- a. The **primary mentor's two-page statement**, in PDF. This statement should include the overall objectives of the project, including the following information about the research proposal: **1)** Specific aim statement; **2)** hypothesis statement; **3)** methods (paragraph); **4)** student role in research (paragraph); **5)** work environment and structure of the research team (paragraph); and **6)** what the student will learn/improve (list or paragraph)
 - **Limit to two (2) pages.** Font size 10-point or higher - References should be included on Page 1.
- b. Institution's IRS 501c(3) Letter of Determination or other Federal determination letter and Federal Employment Identification Number, in PDF.

Transcripts and recommendation letters are required but should not be included in the application submission upload.

- Transcripts of undergraduate through most recent available period of allopathic or osteopathic medical school are required. Include GPAs if possible. Transcripts must be sent via email with a password-protected link from Parchment, National Student Clearing House or similar agent sent directly to MariaClaudia Lora-Montano. Transcripts will only be accepted via email and must be received at mlora@rpbusa.org **no later than 11:59pm ET on the deadline date.** Late transcripts or transcripts included in the upload will not be accepted.
- Recommendation letters from three (3) established scientists, mentors, and/or leaders who know the candidate very well must be submitted for this application. Letters must be signed on letterhead, in PDF, and addressed to "RPB Review Committees". Subject line of the letter must include candidate's name with degrees, name of nominating school, and "Medical Student Fellowship."

Recommendation letters must be sent directly from the referee or his/her office and cannot be attached to the candidate's application submission upload. Recommendation letters will only be accepted via email and must be received at mlora@rpbusa.org no later than 11:59pm ET on the deadline date. Late letters, additional letters, or letters included in the upload will not be accepted.

- **Email subject line: MSF Recommendation Letter – Candidate Last Name, First Name**

**** Late letters, additional letters, or letters included in the upload will not be accepted.** Any materials received after the deadline, including recommendation letters and transcripts, will not be accepted and will render the submission **incomplete**.

Materials received after the deadline will not be accepted and will render the submission as incomplete. The review committees do not review incomplete submissions, which are automatically declined. Do not alter the application format. Do not include manuscripts, reprints, or any information not required by RPB. **Notify RPB if there are any changes to the status of major pending grants after the application has been submitted.**

RPB grants awards at its full discretion; we reserve the right not to make any award based on the submissions.

Any questions, please contact MariaClaudia Lora-Montano at 646-892-9564 or mlora@rpbusa.org

APPLICATION PREPARATION

We've included information below to assist you in preparing and completing RPB's Medical Student Eye Research Fellowship Application.

Do not change formatting. Please keep pagination the same. If necessary, abbreviate answers to fit allotted space. Please provide responses in Arial 9 (font/size). Do not change the font/size of the actual questions.

<p>Candidate Information:</p> <ul style="list-style-type: none"> ➤ Enter Candidate's name. ➤ OPTIONAL: RPB is committed to diversity and, if relevant, encourages applicants to self-identify as a racial / ethnic underrepresented minority as defined by the NIH. Please indicate the one box that describes the race/ethnicity category with which you primarily identify, if applicable. This information is voluntary. ➤ Enter year MD is anticipated. ➤ Place X to the right of your selection for the following (see example below): <p style="text-align: center;"> US Citizen Permanent Resident (Green Card Holder) X </p> <ul style="list-style-type: none"> ➤ Enter name of submitting institution and ophthalmology Chair; include degrees. ➤ Enter current status, e.g., 2nd Year Medical Student, and school. ➤ Enter proposed status, e.g., Fellow, Ophthalmology Department, University of New City.
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<p>Fellowship:</p> <ul style="list-style-type: none"> ➤ Indicate to which Fellowship the candidate is applying. Place X to the right of your selection for the following (see example below): <p style="text-align: center;"> AOCCO-NHS / SOM X RPB / MD </p>

<p>Education:</p> <ul style="list-style-type: none"> ➤ List baccalaureate through medical school training; list all fellowships and specialties. ➤ Include mentors (if applicable) next to institution name (see example below): <p style="text-align: center;"> University of New City, T. Smith </p> <ul style="list-style-type: none"> ➤ Enter Years as YY-YY. Provide actual years at institution, e.g., 05-09, not total number of years, e.g., 4.

<p>Specialty Field of Proposed Research:</p> <ul style="list-style-type: none"> ➤ Place X to the right of your selection for the following (see example below): <p style="text-align: center;"> Anatomy/Pathology/Oncology X Biochemistry/Molecular Biology Clinical/Epidemiologic Cornea Lens </p>
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<p>Title of Proposed Research:</p> <ul style="list-style-type: none"> ➤ Enter title of proposed research. Do not go beyond allotted space.
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<p>Candidate's Summary:</p> <ul style="list-style-type: none"> ➤ Limit response to five (5) lines or less. ➤ In layman's terms, include research interests and background, anticipated benefit of fellowship, and description of the candidate's role in the proposed research. Candidate may expand in statement.
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<p>Summary of Objectives/Significance/Benefits of Proposed Research Activities:</p> <ul style="list-style-type: none"> ➤ Limit response to five (5) lines or less. ➤ In layman's terms, summarize overall objectives, significance, benefits of the proposed research activities, including the candidate's participation in the research. Mentor may expand in statement.
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Timeframe for Collaboration:
➤ Enter as MM/YY-MM/YY.

Mentors:
➤ List mentors with primary mentor noted first; include degrees, titles and departments.

Letters of Recommendation:
➤ List individuals submitting recommendation letters, including degrees, titles, departments, and schools.

For RPB Use Only:
➤ This section is for RPB Use Only. DO NOT ENTER ANY INFORMATION.

Primary Mentor's Current NEI Support as Principal Investigator (PI) or Multiple PI:
<ul style="list-style-type: none"> ➤ Indicate no-cost extensions with an asterisk (*), e.g., 21-25*. ➤ Specify Source. ➤ Specify Type, e.g., K08, R01, R21, etc. ➤ Enter Annual Direct Costs and Total Grant Amount (include direct and indirect costs in Total Grant Amount). Total Grant Amount should reflect the entire grant period. ➤ Enter Years as YY-YY. Provide actual years of grant, e.g., 21-25, not total number of years, e.g., 4.

Primary Mentor's Current NIH Support (other than NEI) as Principal Investigator (PI) or Multiple PI:
<ul style="list-style-type: none"> ➤ Indicate no-cost extensions with an asterisk (*), e.g., 21-25*. ➤ Specify Source. ➤ Specify Type, e.g., K05, K21, R55, etc. ➤ Enter Annual Direct Costs and Total Grant Amount (include direct and indirect costs in Total Grant Amount). Total Grant Amount should reflect the entire grant period. ➤ Enter Years as YY-YY. Provide actual years of grant, e.g., 21-25, not total number of years, e.g., 4.

Primary Mentor's NIH Support as Principal Investigator (PI) or Multiple PI Terminated Within Past Three Years:
<ul style="list-style-type: none"> ➤ Include all NIH support. ➤ Specify Source. ➤ Specify Type, e.g., K08, R01, R21, etc. ➤ Enter Total Grant Amount (including direct and indirect costs). Total Grant Amount should reflect the entire grant period. ➤ Enter Years as YY-YY. Provide actual years of grant, e.g., 20-22, not total number of years, e.g., 2.

Primary Mentor's Current Grant Support (other than NIH and NEI) as Principal Investigator (PI) or Multiple PI:
<ul style="list-style-type: none"> ➤ Indicate no-cost extensions with an asterisk (*), e.g., 21-25*. ➤ Specify Source. ➤ Specify Type, if applicable. ➤ Enter Annual Direct Costs and Total Grant Amount (include direct and indirect costs in Total Grant Amount). Total Grant Amount should reflect the entire grant period. ➤ Enter Years as YY-YY. Provide actual years of grant, e.g., 21-25, not total number of years, e.g., 4.

Primary Mentor's Pending Grant/Renewal Support (all) as Principal Investigator (PI) or Multiple PI:
<ul style="list-style-type: none"> ➤ Notify RPB of any status change to this listing after submitting application. ➤ Specify Source. ➤ Specify Type, e.g., K08, R01, R21, etc. ➤ Enter Total Grant Amount (including direct and indirect costs). Total Grant Amount should reflect the entire grant period. ➤ Enter Years as YY-YY. Provide actual years of grant, e.g., 23-25, not total number of years, e.g., 2.

Publications:

- Primary Mentor's Publication History: Provide number of peer-reviewed publications; number of other publications; and the total number of publications in the mentor's career (number of peer-reviewed and other publications should equal total number of publications).
- Primary Mentor's Publications Pertaining to Proposed Research: Provide number of peer-reviewed publications; number of other publications; and the total number of publications pertaining to proposed research (number of peer-reviewed and other publications should equal total number of publications). Indicate number of publications pertaining to proposed research listed in mentor's biosketch.

Brief Description of Primary Mentor's Success as a Mentor:

- **Limit response to eleven (11) lines or less.**
- Primary Mentor should describe his/her success as a mentor. Include total number of mentees; did former mentees publish as a result of their research work in mentor's lab; have former mentees gone on to receive NIH funding; etc.

Agreement:

- Chair, Candidate, and Primary Mentor to sign.

Contact Information:

- Complete current contact information for Candidate.
- Enter contact information for Primary and Secondary (if applicable) Mentor(s); include degrees.
- Enter contact information for ophthalmology Chair; include degrees.
- Enter contact information of Research Grant Administrator responsible for RPB applications. Include address if different than Chair's and include degrees.
- Enter contact information for Ophthalmology Director of Research; include degrees.

NIH-STYLE BIOSKETCH FORMAT AND SAMPLE

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:

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

POSITION TITLE:

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 <i>(if applicable)</i>	Completion Date MM/YYYY	FIELD OF STUDY

A. Personal Statement

Briefly describe why you are well-suited for your role(s) in this project. Relevant factors may include: aspects of your training; your previous experimental work on this specific topic or related topics; your technical expertise; your collaborators or scientific environment; and/or your past performance in this or related fields, including ongoing and completed research projects from the past three years that you want to draw attention to (previously captured under Section D. Research Support).

You may cite up to four publications or research products that highlight your experience and qualifications for this project. Research products can include, but are not limited to, audio or video products; conference proceedings such as meeting abstracts, posters, or other presentations; patents; data and research materials; databases; educational aids or curricula; instruments or equipment; models; protocols; and software or netware. Use of hyperlinks and URLs to cite these items is not allowed.

You are allowed to cite interim research products. **Note:** interim research products have specific citation requirements.

Note the following additional instructions for ALL applicants/candidates:

- If you wish to explain factors that affected your past productivity, such as family care responsibilities, illness, disability, or military service, you may address them in this "A. Personal Statement" section.
- Indicate whether you have published or created research products under another name.
- You may mention specific contributions to science that are not included in Section C. Do not present or expand on materials that should be described in other sections of this Biosketch or application.
- Figures, tables, or graphics are not allowed.

B. Positions, Scientific Appointments, and Honors

List in reverse chronological order all current positions and scientific appointments both domestic and foreign, including affiliations with foreign entities or governments. This includes titled academic, professional, or institutional appointments whether or not remuneration is received, and whether full-time, part-time, or voluntary (including adjunct, visiting, or honorary). High school students and undergraduates may include any previous positions. For individuals who are not currently located at the applicant organization, include the expected position at the applicant organization and the expected start date.

List any relevant academic and professional achievements and honors. In particular:

- Students, postdoctorates, and junior faculty should include scholarships, traineeships, fellowships, and development awards, as applicable.
- Clinicians should include information on any clinical licensures and specialty board certifications that they have achieved.

C. Contributions to Science

Who should complete the "Contributions to Science" section:

All senior/key persons should complete the "Contributions to Science" section except candidates for research supplements to promote diversity in health-related research who are high school students, undergraduates, and post-baccalaureates.

Format:

Briefly describe up to five of your most significant contributions to science. The description of each contribution should be no longer than one half page, including citations.

While all applicants may describe up to five contributions, graduate students and postdoctorates may wish to consider highlighting two or three they consider most significant.

Content:

For each contribution, indicate the following:

- the historical background that frames the scientific problem;
- the central finding(s);
- the influence of the finding(s) on the progress of science or the application of those finding(s) to health or technology; and
- your specific role in the described work.
- Figures, tables, or graphics are not allowed.

For each contribution, you may cite up to four publications or research products that are relevant to the contribution. If you are not the author of the product, indicate what your role or contribution was. Note that while you may mention manuscripts that have not yet been accepted for publication as part of your contribution, you may cite only published papers to support each contribution. Research products can include audio or video products; conference proceedings such as meeting abstracts, posters, or other presentations; patents; data and research materials; databases; educational aids or curricula; instruments or equipment; models; protocols; and software or netware. Use of hyperlinks and URLs to cite these items is not allowed.

You are allowed to cite interim research products. Note: interim research products have specific citation requirements.

You may provide a URL to a full list of your published work. This URL must be to a Federal Government website (a .gov suffix). NIH recommends using *My Bibliography*. Providing a URL to a list of published work is not required.

Descriptions of contributions may include a mention of research products under development, such as manuscripts that have not yet been accepted for publication. These contributions do not have to be related to the project proposed in this application.

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: Hunt, Morgan Casey

eRA COMMONS USER NAME (credential, e.g., agency login): huntmc1

POSITION TITLE: Associate Professor of Psychology

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 <i>(if applicable)</i>	Completion Date MM/YYYY	FIELD OF STUDY
University of California, Berkeley	BS	05/2003	Psychology
University of Vermont	PHD	05/2009	Experimental Psychology
University of California, Berkeley	Postdoctoral	08/2013	Public Health and Epidemiology

A. Personal Statement

I am an Associate Professor of Psychology, and my research is focused on neuropsychological changes associated with substance use disorders. I have a broad background in psychology, with specific training and expertise in ethnographic and survey research and secondary data analysis on psychological aspects of substance use disorders. As PI or co-Investigator on several university- and NIH-funded grants, I laid the groundwork for the proposed research by developing effective measures of disability, depression, and other psychosocial factors relevant to older people with substance use disorders, and by establishing strong ties with community providers that will make it possible to recruit and track participants over time as documented in the following publications. In addition, I successfully administered the projects (e.g. staffing, research protections, budget), collaborated with other researchers, and produced several peer-reviewed publications from each project. As a result of these previous experiences, I am aware of the importance of frequent communication among project members and of constructing a realistic research plan, timeline, and budget. The current application builds logically on my prior work. During 2015-2016, my career was disrupted due to family obligations. However, upon returning to the field, I immediately resumed my research projects and collaborations and successfully competed for NIH support. In summary, I have the expertise, leadership, training, expertise, and motivation necessary to successfully carry out the proposed research project.

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

R01 DA942367
 Hunt (PI)
 09/01/16-08/31/21
 Health trajectories and behavioral interventions among older people with substance use disorders

R01 MH922731
 Merryle (PI), Role: co-investigator
 12/15/17-11/30/22
 Physical disability, depression, and substance use among older adults

R21 AA998075

Hunt (PI)

01/01/19-12/31/21

Community-based intervention for alcohol abuse

Citations:

1. Merryle, R.J. & **Hunt, M.C.** (2015). Independent living, physical disability and substance use among older adults. *Psychology and Aging*, 23(4), 10-22.
2. **Hunt, M.C.**, Jensen, J.L. & Crenshaw, W. (2018). Substance use and mental health among community-dwelling older adults. *International Journal of Geriatric Psychiatry*, 24(9), 1124-1135.
3. **Hunt, M.C.**, Wiechelt, S.A. & Merryle, R. (2019). Predicting the substance use treatment needs of an aging population. *American Journal of Public Health*, 45(2), 236-245. PMID: PMC9162292
4. Merryle, R. & **Hunt, M.C.** (2020). Randomized clinical trial of cotinine in older people with nicotine use disorder. *Age and Aging*, 38(2), 9-23. PMID: PMC9002364

B. Positions, Scientific Appointments, and Honors

Positions and Scientific Appointments

2021– Present	Associate Professor, Department of Psychology, Washington University, St. Louis, MO
2020 – Present	Adjunct Professor, McGill University Department of Psychology, Montreal, Quebec, Canada
2018 – Present	NIH Risk, Adult Substance Use Disorder Study Section, member
2015 – 2017	Consultant, Coastal Psychological Services, San Francisco, CA
2014 – 2021	Assistant Professor, Department of Psychology, Washington University, St. Louis, MO
2014 – 2015	NIH Peer Review Committee: Psychobiology of Aging, ad hoc reviewer
2014 – Present	Board of Advisors, Senior Services of Eastern Missouri
2013 – 2014	Lecturer, Department of Psychology, Middlebury College, Middlebury, VT
2011 – Present	Associate Editor, <i>Psychology and Aging</i>
2009 – Present	Member, American Geriatrics Society
2009 – Present	Member, Gerontological Society of America
2009 – 2013	Fellow, Intramural Research Program, National Institute on Drug Abuse, Baltimore, MD
2006 – Present	Member, American Psychological Association

Honors

2020	Award for Best in Interdisciplinary Ethnography, International Ethnographic Society
2019	Excellence in Teaching, Washington University, St. Louis, MO
2018	Outstanding Young Faculty Award, Washington University, St. Louis, MO

C. Contributions to Science

1. My early publications directly addressed the fact that substance use is often overlooked in older adults. However, because many older adults were raised during an era of increased drug and alcohol use, there are reasons to believe that this will become an increasing issue as the population ages. These publications found that older adults appear in a variety of primary care settings or seek mental health providers to deal with emerging concerns about a substance use disorder. These publications document this emerging concern and guide primary care providers and geriatric mental health providers to recognize symptoms, assess the nature of the behavior, and apply the necessary interventions. By providing evidence and simple clinical approaches, this body of work has changed the standards of care for older adults with substance use disorders and will continue to provide assistance in relevant medical settings well into the future. I served as the primary investigator or co-investigator in all of these studies.

- a. Gryczynski, J., Shaft, B.M., Merryle, R., & **Hunt, M.C.** (2013). Community based participatory research with late-life substance use disorder. *American Journal of Alcohol and Drug Abuse*, 15(3), 222-238.
 - b. Shaft, B.M., **Hunt, M.C.**, Merryle, R., & Venturi, R. (2014). Policy implications of genetic transmission of alcohol and drug use in women who do not use drugs. *International Journal of Drug Policy*, 30(5), 46-58.
 - c. **Hunt, M.C.**, Marks, A.E., Shaft, B.M., Merryle, R., & Jensen, J.L. (2015). Early-life family and community characteristics and late-life substance use. *Journal of Applied Gerontology*, 28(2),26-37.
 - d. **Hunt, M.C.**, Marks, A.E., Venturi, R., Crenshaw, W. & Ratonian, A. (2018). Community-based intervention strategies for reducing alcohol and drug use in older adults. *Addiction*, 104(9), 1436-1606. PMID: PMC9000292
2. In addition to the contributions described above, with a team of collaborators, I directly documented the effectiveness of various intervention models for older people with substance use disorders and demonstrated the importance of social support networks. These studies emphasized contextual factors in the etiology and maintenance of substance use disorders and the disruptive potential of networks in substance use treatment. This body of work also discusses the prevalence of alcohol and amphetamine use in older adults and how networking approaches can be used to mitigate the effects of these disorders.
- a. **Hunt, M.C.**, Merryle, R. & Jensen, J.L. (2015). The effect of social support networks on morbidity among older adults with substance use disorders. *Journal of the American Geriatrics Society*, 57(4), 15-23.
 - b. **Hunt, M.C.**, Pour, B., Marks, A.E., Merryle, R. & Jensen, J.L. (2018). Aging out of methadone treatment. *American Journal of Alcohol and Drug Abuse*, 15(6), 134-149.
 - c. Merryle, R. & **Hunt, M.C.** (2020). Randomized clinical trial of cotinine in older people with nicotine use disorders. *Age and Ageing*, 38(2), 9-23. PMID: PMC9002364
3. Methadone maintenance has been used to treat people with substance use disorder for many years, but I led research that has shown that over the long-term, those in methadone treatment view themselves negatively and they gradually begin to view treatment as an intrusion into normal life. Older adults were shown, in carefully constructed ethnographic studies, to be especially responsive to tailored social support networks that allow them to eventually reduce their maintenance doses and move into other forms of therapy. These studies also demonstrate the policy and commercial implications associated with these findings.
- a. **Hunt, M.C.** & Jensen, J.L. (2013). Morbidity among older adults with substance use disorders. *Journal of the Geriatrics*, 60(4), 45-61.
 - b. **Hunt, M.C.** & Pour, B. (2015). Methadone treatment and personal assessment. *Journal Drug Abuse*, 45(5), 15-26.
 - c. Merryle, R. & **Hunt, M.C.** (2018). The use of various nicotine delivery systems by older people with nicotine use disorder. *Journal of Aging*, 54(1), 24-41. PMID: PMC9112304
 - d. **Hunt, M.C.**, Jensen, J.L. & Merryle, R. (2020). Aging and substance use disorder: ethnographic profiles of older people with substance use disorder. NY, NY: W. W. Norton & Company.

Complete List of Published Work in MyBibliography:

<https://www.ncbi.nlm.nih.gov/myncbi/1ICiFFV4VYQZE/bibliography/public/>