

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
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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 (if applicable) | 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. I have worked with community providers that will make it possible to recruit and track participants for the proposed research. The following publications. In addition, I successfully administered the project (within budget), collaborated with other researchers, and produced several peer-reviewed articles from the project. As a result of these previous experiences, I am aware of the importance of communication among project members and of constructing a realistic research plan, that the current application builds logically on my prior work. During 2015-2016, my career was interrupted by family obligations. However, upon returning to the field, I immediately resumed my research collaborations and successfully competed for NIH support. In summary, I have the training, expertise, and motivation necessary to successfully carry out the proposed research.

Include ongoing and completed research projects from the past three years that you want to draw attention to in Section A. (previously captured under Section D. Research Support). Not all projects need to be identified.

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

Citations:

1. Merrylye, R.J. & **Hunt, M.C.** (2015). Independent older adults. *Psychology and Aging*, 23(4), 1000-1008.
2. **Hunt, M.C.**, Jensen, J.L. & Crenshaw, W. (2019). Community-dwelling older adults. *International Journal of Gerontology*, 9, 1124-1135.
3. **Hunt, M.C.**, Wiechelt, S.A. & Merrylye, R. (2020). An aging population. *American Journal of Public Health*, 110(10), 1555-1556.
4. Merrylye, R. & **Hunt, M.C.** (2020). Randomized controlled trial of a community-based intervention for alcohol use disorder. *Age and Aging*, 38(2), 9-23. PMID: 32000000

Section B. has been revised to include Scientific Appointments, both domestic and foreign. 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).

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, Department of Psychology, Montreal, Quebec, Canada |
| 2018 – Present | NIH Research Study Section, member |
| 2015 – 2017 | Consultant, San Francisco, CA |
| 2014 – 2021 | Assistant Professor, Department of Psychology, Washington University, St. Louis, MO |
| 2014 – 2015 | NIH Peer Reviewer, Department of Psychology of Aging, ad hoc reviewer |
| 2014 – Present | Board of Directors, 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 |

List in reverse chronological order (beginning with current positions and appointments).

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., Merrylye, 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.**, Merrylye, 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., Merrylye, 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. PMCID: 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.**, Merrylye, 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., Merrylye, R. & Jensen, J.L. (2018). Aging out of methadone treatment. *American Journal of Alcohol and Drug Abuse*, 15(6), 134-149.
 - c. Merrylye, R. & **Hunt, M.C.** (2020). Randomized clinical trial of cotinine in older people with nicotine use disorders. *Age and Ageing*, 38(2), 9-23. PMCID: 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. Merrylye, 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. PMCID: PMC9112304
 - d. **Hunt, M.C.**, Jensen, J.L. & Merrylye, 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/1ICifFFV4VYQZE/bibliography/public/>