Exhibit G

AT THE FOREFRONT
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Affidavit of Scott J. Hunter, PhD regarding Freddie Eugene Owens (Khalil Divine Black Sun Allah)

I. Statement of Referral and Summary of Opinions

I, Scott J. Hunter, PhD, submit this affidavit regarding current knowledge of neurodevelopmental science and its applicability to understanding the neurodevelopmental status of Freddie Eugene Owens at the time of his criminal actions that led to his being sentenced to death, at the behest of his attorneys. At question with this consultation is our present understanding of information that was not available at the time of Mr. Owens' initial trial and subsequent sentencings, regarding the time frame and degree of his neurodevelopment present during late adolescence and emerging adulthood, particularly with regard to capacities of executive functioning, emotional and behavioral regulation, and agency. Additionally, consideration is given regarding Mr. Owens' sentencings in light on this neurodevelopmental science, and how they should be understood legally following multiple United States Supreme Court decisions regarding adolescent culpability. More specifically, at the time jurors determined to sentence Mr. Owens to death, our understanding of the neurological and behavioral impact of trauma on childhood and adolescent development, and normative neurodevelopment in aggregate, was incomplete in comparison with our knowledge at this time. As an expert on cognitive and behavioral development, capacity, and capability, and how our current knowledge regarding neurodevelopment has come to inform our understanding of emerging adulthood responsibility, I have been asked to discuss these considerations as they pertain to Mr. Owens at the time of his crime and sentencings, and how this can serve to mitigate his legal culpability given the array of neurodevelopmental vulnerabilities that underlie his actions and behaviors.

From 1999, when Mr. Owens was first sentenced to death, through 2006, when his current sentence was imposed, the degree of information regarding his neurological status and neurodevelopment was significantly more limited with regard to where we stand now scientifically. At the time of his actions and sentencings, Mr. Owens was still someone immature in terms of his brain development, both secondary to the time frame within

which full adult maturity is actually attained, and as a result of, as will be discussed in this affidavit, the degree of neurological insult he experienced over the course of his childhood and adolescence, both from physical abuse and trauma he endured, and as a result of his early deprivation. His cumulative history of insults neurodevelopmentally, poor support and educational engagement, trauma and physical violence perpetrated on him, and ongoing experiences of threat and a belief that he must defend against that threat, left him at the time of his crime unable to rely on effective problem solving capacities and regulatory "brakes" that would have been present for someone who is neurotypical in their development. His judgment and capacity for making effective choices was severely limited as a result of his neurodevelopmental immaturity at age 19; this would have been the case even had he not also experienced the plethora of neurodevelopmental challenges present in his history. The 9/2/2016 neuroimaging report by Dr. Ruben Gur and the neuropsychological evaluations conducted by Dr.'s Evans, Brawley, and Wood confirm these opinions.

Taking current knowledge regarding when the brain is fully mature and how that occurs in a neurodevelopmentally challenged individual, I will discuss the mitigating reasons behind his behavior and his incapability developmentally to be able to fully control his behavior. Key to this is the recognition that at age 19, when the murder occurred, Mr. Owens was not at an adult level of behavioral and emotional control or problem solving capacity, even if he were neurodevelopmentally normal (Galvan, 2017; Steinberg, 2014). Significant advances in neurodevelopmental science since the time Mr. Owens was sentenced to death have shown us that the brain is still actively developing throughout the period of time in which people typically are recognized as legally adult in the United States; in fact, the brain does not reach full adult capacities in regard to emotional and behavioral regulation, and executive functioning (i.e., the skills necessary for managing actions and choices) until at least the mid-twenties. Further challenging this process is his lifetime experience of neurodevelopmental insult, including trauma and physical injury to the brain. Mr. Owens was both still neurologically immature and as a result less capable of responsible actions when under challenge and threat, and more limited in being able to meet the demands of responsible action given his complex neurodevelopmental injuries. Therefore, at the time of his actions at age 19, that contributed to his arrest and subsequent sentencings, he was not functioning as an adult and was incapable of making adult level decisions or actions. This has become understood now within the legal context as specific mitigating information, reflected in recent decisions by the United States Supreme Court regarding the immature brain and how that influences death penalty options (i.e., Roper 543 U.S. 551, 2005). This has been further articulated as a mitigating consideration when addressing the neurodevelopmental differences that exist for individuals with a disability secondary to brain trauma and its impact on adaptive and regulatory capacities (AAIDD and The ARC, 2014).

II. Qualifications Review:

My education and experience as background to my role as an expert consultant for this matter are provided in the attached CV.

I am presently Professor of Psychiatry and Behavioral Neuroscience, and Pediatrics in the University of Chicago's Pritzker School of Medicine and Biological Sciences Division, where I have been a member of the academic and clinical faculty for twenty-two years. Administratively, I serve as Director of Neuropsychology and head of the Pediatric Neuropsychology Service for the University of Chicago Medicine and Comer Children's Hospital. I am additionally a faculty member and attending clinical ethicist with the MacLean Center for Clinical Medical Ethics with the University of Chicago Medicine and Pritzker School of Medicine. Pertinent to this consultation is my role as a member of the Steering Committee and as a principle faculty member of the University of Chicago's Trauma Interest Work Group, an interdisciplinary collaboration of faculty, clinical staff, and students and trainees who specialize in research and practice addressing community and interpersonal violence and trauma, focusing specifically on Chicago and its neighborhoods. Lastly, I am a faculty affiliate with the Center for Health and the Social Sciences (CHeSS), an interdisciplinary research and training program within the University that addresses disparities in health care, across social science and medical disciplines.

I hold the PhD in Clinical and Developmental Psychology, with emphases in Behavioral Neuroscience and Neurodevelopmental Disorders, from the University of Illinois at Chicago. My research focused on the use of electrophysiological methodologies, specifically EEG technologies, to understand the early development of attentional, memory, and executive functioning capacities in normally developing and neurogenetically affected infants and children. Following an American Psychological Association (APA) accredited doctoral internship in Clinical Psychology in the Department of Psychiatry and Behavioral Sciences and Stone Institute of Psychiatry at Northwestern University's Feinberg School of Medicine (Chicago, IL), I completed a postdoctoral residency in Pediatric Neuropsychology in the Department of Neurology and a Leadership in Education in Neurodevelopmental and Related Disabilities (LEND) fellowship in the Strong Center for Developmental Disabilities at the University of Rochester School of Medicine and Dentistry and Strong Memorial Hospital (Rochester, NY). My postdoctoral research continued to focus on the use of neuroimaging and neurobehavioral methodologies to understand atypical neurodevelopment. I am additionally fellowship trained in Clinical Medical Ethics through the MacLean Center for Clinical Medical Ethics at the University of Chicago.

My research and clinical practice at the University of Chicago have focused specifically on trajectories of neurocognitive and behavioral risk and resilience, and their support and remediation, in high-risk, urban residing youth, across multiple areas of potential neurodevelopmental impact (e.g., medical illness, community based and interpersonal trauma and neglect, neurodevelopmental and genetic disorders, acquired neurocognitive and behavioral insults, developmental psychopathology, and socioeconomic adversity impacting both health status and educational attainment). My published scholarship has emphasized intersectional contributions to neurodevelopmental challenge, specifically those impacting attention, executive functioning, and agency, and the acquisition of adult independence; these include poverty, intergenerational trauma and vulnerability to developmental compromise, and exposure to disruptive circumstances developmentally

(e.g., exposure to substances, prematurity, homelessness, and HIV/AIDS) that can lead to significant learning and regulatory risks. I am an author of numerous peer-reviewed research articles and book chapters, and co-author and editor of four well-regarded textbooks addressing pediatric and lifespan neuropsychological development, including one book that specifically addresses the development of executive functioning and the relationship between executive dysfunction and disability across neurodevelopmental and medical conditions. I am additionally a co-author of multiple peer-reviewed publications and one book addressing multicultural considerations in the practice of professional psychology. I have consulted in legal (both civil and criminal) contexts for over twenty years, including as an expert in death penalty cases at both the federal and state levels.

III. Pertinent Background Regarding Freddie Eugene Owens:

I have reviewed materials provided by counsel for Mr. Owens, regarding his developmental history, educational attainment, and the legal circumstances leading to his being sentenced to death, in addition to the results and discussions from his three neuropsychological evaluations (i.e., Evans, Brawley, and Wood), and the neuroimaging evaluation conducted by Dr. Gur during adjudication; the expert opinions offered during his trials; and the court record regarding his sentencings. These documents together provided a rich understanding of Mr. Owens' underlying array of vulnerabilities and challenges neurodevelopmentally. I will review the pertinent information as it pertains to my opinions, offered in Section V.

Records indicated that Mr. Owens was born prematurely and at already exceptionally high risk for significant developmental concerns to a mother who herself had grown up in poverty and with multiple levels of intergenerational trauma, substance exposure, and neglect. The second of four children born to Dora Owens and F.E. Massey, Mr. Owens experienced substantial exposures across his early life to significant community violence, multiple episodes of interpersonal violence within the home, abuse and neglect from both his biological parents and his step-father, and due to the impoverishment of the home environment, significant inconsistencies in security, nutrition, and appropriate medical and behavioral supports. While it appears that neither Mr. Owens nor his older sister were identified as having a frank intellectual disability, Mr. Owens was identified early in his educational history with substantial and clearly severe learning disabilities that hampered his capacity to meet basic academic and adaptive goals, despite reported placement under an educational plan that supposedly provided special educational supports. However, it is also important to recognize too that he did not regularly attend school, with extensive absences each academic year prior to his leaving secondary education at the ninth grade; these absences further compromised his acquisition of skills and knowledge pertinent to building capacities needed as he reached adulthood. Further notable is the record that his two younger brothers were both identified with intellectual disability and learning disabilities. Records indicated that all of the children born to his family were raised in an environment that was violent, with multiple episodes reported (and in some instances, proudly so) of physical and psychological abuse, from both biological parents, and their step-father. They also witnessed spousal abuse, that Mr. Owens noted and was

corroborated by others, that led to his efforts at attempting to protect his mother, contributing to further risk to himself.

Made extremely clear throughout the information gained both from Mr. Owens on interviews I reviewed, and interviews of his family members also reviewed, was that modeling of aggression, and the understanding that incarceration was to be expected, were particular experiences Mr. Owens grew up with, both within the home and in the immediate community. This was in fact seen across generations of his family. Both his mother and step-father were known to be drug users and dealers. Mr. Owens was engaged from childhood in supporting his parents' dealing and the associated criminal activities that occurred secondary to that activity. Mr. Owens' step-father was incarcerated numerous times during Mr. Owens' childhood in relationship to his dealing of substances, his own substance abuse, and his violence. Mr. Owens' biological father, Mr. Massey, was also involved in drug use/abuse and dealing, as well as experienced multiple episodes of incarceration associated with his aggressive and abusive actions; this was noted to be modeled intergenerationally for Mr. Massey as well, with regard to his own developmental history. Mr. Owens' mother was abused by both his biological father and step-father, and he learned early that it was important to attempt to protect his mother, who also was abusive and neglectful towards him. Mr. Owens' step-father reported on interview viewing abuse as a means of "toughening up" his step-son, to foster his capacity to exist in their aggressive family and community structure. This abuse modeling was also perpetrated on Mr. Owens' siblings, who in turn were ultimately hampered in their capacity to develop effectively as prosocial and independent individuals, like their brother.

It is important to recognize as well that Mr. Owens' maternal grandmother was a known bootlegger and substance user, severely physically and emotionally abused herself, and also violent in turn. She served a prison term for her aggression and violence with a firearm. There is strong suggestion, given her own intellectually disabled son, that family exposure to the toxicities of trauma and substance use/abuse (e.g., alcohol abuse) led to likely genetic risks for multiple deficits in neurodevelopment generationally. Furthermore, modeling of aggression throughout the family highlights a disrupted capacity for developing appropriate trusting and responsive relationships, across generations, in addition to the reliance on significant aggressive and violent actions as a means for managing emotional and adaptive challenges.

Further adding to this set of profound traumatic and neurodevelopmental challenges is the recognition that as an adolescent, Mr. Owens entered the carceral system, both among peers who engaged in ongoing violent and aggressive acts both to him and around him, and among adults who perpetrated the same. Mr. Owens was ultimately unsupported towards making effective changes, at a time when he was most open to such change, both neurodevelopmentally given neural plasticity and the potential growth of his executive capacities as an adolescent moving towards emerging adulthood, when the brain is finalizing its organization in regard to problem solving and adaptive skills, and with continued modeling of substantially disruptive responses to threat and regulation, that hampered significantly any potential for making change in his behavior or self-control.

He instead was exposed to negative models of response, and with ongoing experienced threats to his safety and security, that served to prevent more adaptive and flexible neuropsychological and behavioral outcomes. This continued on his release back into his home community; he returned to the exact environment that altered his neurodevelopmental and behavioral maturity, with the same demands and pressures to address, but without improved available options for different outcomes adaptively.

The history that is presented regarding Mr. Owens is one of clearly altered brain development and a resulting disrupted range of behavioral and neurocognitive outcomes, in response to profound neglect and trauma; very limited educational or psychosocial supports; ongoing maltreatment and trauma from birth through his incarcerations; aggression not managed or contained but instead channeled and understood as a defensive response towards a perceived (and actually) threatening world; ongoing adult modeling of violence and substance use/abuse; and failures across educational, psychosocial and vocational opportunities to address the underlying challenges that he presented across time. Mr. Owens experienced repeated incidents of brain trauma, starting from his premature birth, but then predominantly related to multiple incidences of interpersonal and community aggression across childhood through emerging adulthood. These taken together have contributed to a significant degree of damage to his brain that was revealed by both the profiles of disruption cognitively that he demonstrated on neuropsychological testing and the neuroimaging evaluation that was conducted by Dr. Gur. As will be discussed below, Mr. Owens' severely traumatic and violent early developmental history, that was heightened further through poverty and neglect, and his experience of multiple head injuries, contributed to profoundly disrupted neurological development across time. This has affected his capacity for inhibition, emotion regulation, anger and aggression management, and contributed to his vulnerability to violence and its modeling. These deficits are the direct expression of his negative trajectory of frontal and regulatory neurological development, across the foundational formation of structural networks and their appropriate linkages with associated systems of broader behavioral and cognitive capacities. The addition of his traumatic adolescent incarceration and its exaggerated episodes of further maltreatment, threat, and trauma have further served, during a key developmental period, to disrupt the necessary development of frontal neural networks expected and reduced the capacity for improved outcome, given the lack of available sustained interventions that could have prevented further disruption to his emergence into a developmentally appropriate adulthood. The lack of supportive interventions that could very well have assisted in altering this outcome for him further contributed to his behavioral responses when he returned back to his violent and challenged environment post prison release. The lack of appropriate supports that are required during a key period of time that remains available for maturity in development has meant that Mr. Owens had no capacity available for new models and more effective responses to draw from, and contributed to his engagement of a limited range of choices behaviorally. His underlying neurodevelopmental disruption and its altered maturity have led to his continued reliance on impulsive and aggressive behaviors; what he has come solely to know as the most appropriate options available to him.

Mr. Owens' brain injuries and their impact on his neurodevelopmental course have led him to be someone who requires strong structure and rules. His range of behavioral responses are improved by the scaffolding (e.g., more limited expectations and significant level of daily structure) that he can experience within prison, when he is offered a set of expectations and management of actions and behaviors that allow him to engage in better behavioral choices. While he has a significant neurological disruption in his capacity to meet external world adaptive demands, he is capable, and has shown the capacity to engage in greater levels of opportunity towards a more productive life within the confines of incarceration.

IV. Supportive Research Underling Opinions Regarding Developmental Neuropsychological Implications:

1. What is believed most important to recognize with regard to the opinions offered at the time of Mr. Owens' previous hearings and his sentencings is that our foundation of knowledge regarding neurodevelopmental science has progressed significantly. During his previous trials, efforts were made to share some of what was increasingly becoming known scientifically regarding brain development and trauma, and in particular, the vulnerability that exists to significantly disrupted development of executive and regulatory skills as a result of neglect, abuse, and trauma. Since that time, developmental neuroscience has built well forward our knowledge about the structural and communication alterations that take place in brain development as a result of profound intergenerational trauma and neglect, and how that contributes to choices that frequently diminish opportunity for growth in those experiencing those histories across childhood and adolescence (i.e., Buss, et al., 2017; De Bellis, et al., 1999; De Bellis & Zisk, 2014; Dye, 2018; Galvan, 2017).
2. These accumulated findings in fact came to underlie the decision made by the United States Supreme Court regarding juvenile risk and the inappropriate application of the death penalty to youth (Roper 543 U.S. 551, 2005) and the inappropriateness of life without parole determinations for juveniles (Graham v. Florida 560 U.S. 48, 2010; Miller v. Alabama 567 U.S. __, 2012), given our understanding of their normally underdeveloped executive functioning systems and vulnerability to impulsive and poorly reasoned choices (i.e., Galvan, 2017; Steinberg, 2014) This has been extended further regarding youth who have been hampered neurodevelopmentally, from such challenges as prematurity, poor environmental support and its sequelae of neglect, abuse, and exposure to substance abuse (Dye, 2018; Shulman & Steinberg, 2016). Each of these challenges have become known as toxic to the brain's development (De Bellis, 2001; De Bellis & Zisk, 2014; Galvan, 2017).
3. Currently, pertinent extant research is available that highlights specifically how the underlying neurogenetics that unfold as a result of intergenerational histories of maltreatment and abuse, and the associated trauma they elicit (Buss et al., 2017):
    a. Gestation is a particularly sensitive period regarding the effects of maternal maltreatment exposure and the

accumulated epigenetic impact of historical experiences of maltreatment and violence.

b. The biological transmission of this impact of intergenerational trauma takes place via epigenetic coding, specifically, genetic modulations that occur that attempt to "correct for" the adverse impact of maltreatment and violence on the individual's brain and developing central and peripheral nervous systems. This leads to the unfolding of altered neural network development – as either an adaptation or an error in neural signaling and downstream response.
c. Environmental interactions that sustain ongoing trauma with each next generation further build upon this history of exposure to maltreatment and trauma, by contributing to alterations in adaptation hormonally and in regard to stress responses. This can lead to inflammatory processes at multiple levels biologically and contribute to a greater vulnerability to, and incidence of poor health, including the development of underlying autoimmune disorders in women who have experienced sustained maltreatment (e.g., Danese, et al., 2007). These adaptive alterations then impact how, when gestating, the fetus is able to effectively develop neurologically and ultimately cognitively and behaviorally.
d. While in utero, brain development in particular is highly vulnerable, due to its specific sensitivity to stress hormones (e.g., Stiles, 2008).
e. Prematurity further hampers the development of the infant and the opportunity for more adaptive responses to both environmental and developmental stressors (e.g., Damman, et al., 2020).
f. Maltreatment leads to significant disruptions in emotional and behavioral regulation, that heighten the negative impact of maternal mood (i.e., depression, anxiety) on fetal environment (Stiles, 2008).
g. Ultimately, these disruptions, both for the birthing parent, and intergenerationally, contribute to vulnerabilities for the fetus and then developing infant – at the genetic level as brain neural networks are being formed and developing, in regard to early disruptions in structural development of the brain; in susceptibility to preterm birth and low birth weight, and to neurocognitive and behavioral disabilities as development unfolds through childhood and into adulthood (De Bellis & Zisk, 2014; Damman, et al., 2021; Stiles, 2008).

4. Furthermore, extant research has identified specific neural changes that take place developmentally secondary to childhood maltreatment and trauma, that alter how the brain develops and contributes to both neurocognitive and behavioral risks (De Bellis, et al, 1999; De Bellis, 2001; De Bellis & Zisk, 2014).
    a. Exposure to violence and aggression, as well as ongoing psychological and physical maltreatment leads to disruptions in normative brain development: "Child abuse experiences may cause delays in, deficits of, or failures of multisystem developmental achievements in behavioral, cognitive, and emotional regulation." (De Bellis, 2001). This occurs secondary to:
        i. permanent alterations in brain developmental pathways including myelination (i.e., specifically in the formation of white matter tracks and the corpus callosum)
        ii. reductions in synaptic density due to alterations in pruning and neuronal growth that support the development of a mature brain across childhood and adolescence
        iii. disruptions structurally and in regard to the connections between subcortical brain structures including hippocampus (memory), amygdala (emotion regulation), and septal association areas – with changes taking place that affect size of the neural structures themselves and as a result, their efficiency in managing the communications required for effective information processing, learning, memory, and ultimately, decision making
        iv. altered organization and growth of prefrontal cortical regions, affecting executive functioning development, through the reduction of available communication pathways as well as failures in effective regulation of information processing
    b. Each of these processes described above are ones that emerge across time, and take advantage of both the environment and the inherent developmental opportunities that exist genetically. Research described by De Bellis in particular has indicated that trauma specifically is found to alter these developmental processes, by either slowing down how they occur, or impairing how they are able to occur. De Bellis and colleagues have stated that "PTSD in maltreated children may be regarded as an environmentally induced complex neurodevelopmental disorder" (De Bellis, et al., 1999), contributing to failures or alterations in the development of capacities to regulate emotional experience, to determine effective responses to stress and

challenge, and to limit the range of options available neurocognitively and behaviorally when under stress and challenge.

5. Normative development of emotion regulation and control, and executive functioning (reasoning, problem solving, strategic thinking, impulse regulation) are among the most vulnerable of capacities with regard to trauma and a lack of support or intervention to remediate trauma (Galvan, 2017; Steinberg, 2017; Steinberg & Icenogle, 2019).
    a. Brain organization and frontal system (executive system) development does not complete until the mid-third decade of life, around 25 years of age.
    b. Adolescence in particular is a period of growth in regard to both emotion regulation and executive control. This follows two previous here earlier periods late infancy through early elementary (kindergarten) age, where disruptions in development will alter expected trajectories of growth and capacity. These three periods in particular are ones in which there exists greater plasticity for opportunity, meaning that there is a window for intervention to support and engage greater potential positive outcomes (e.g., Galvan, 2017; Hunter & Sparrow, 2012).
    c. Males in particular have been shown to present with greater vulnerability to disruptions neurodevelopmentally given their more likely extended period for frontal myelination and development (Galvan, 2017). This means that the window for opportunity for supportive intervention is wider as well (Hunter & Sparrow, 2012).
    d. De Bellis & Zisk (2014) have stated that "[e]xposure to a traumatic event or series of chronic traumatic events (e.g., child maltreatment, community based trauma, violence and aggression) activates the body's biological stress response systems. Stress activation has behavioral and emotional effects that are similar to individual post-traumatic stress symptoms (PTSS). Further, an individual's biological stress response system is made up of different, interacting systems, that work together to direct the body's attention toward protecting the individual against environmental life threats and to shift metabolic resources away from homeostasis toward a "flight or fight" (and/or freezing) reaction. The stressors associated with the traumatic event are processed by the body's sensory systems through the brain's thalamus, which then activates the amygdala, a central component of the brain's fear detection and anxiety circuits. Cortisol levels become elevated through the transmission of fear signals to neurons in the prefrontal cortex, hypothalamus, and hippocampus, and activity

increases in the locus coeruleus and sympathetic nervous system. Subsequent changes in catecholamine levels contribute to changes in heart rate, metabolic rate, blood pressure, and alertness. The process also leads to the activation of other biological stress systems (i.e., limbic-hypothalamic-pituitary-adrenal axis and locus coeruleus-norepinephrine/sympathetic nervous system; serotonin system; oxytocin system; and immune system)."

e. These events lead to, when trauma is sustained, a permanent change in responsivity levels and regulation within the systems responding. These become permanent changes that then disallow more adaptive responses; as a result, the central nervous system remains at threat levels and cannot foster more effective down regulation. This hampers then adaptations in neural communication and resulting information processing, that contribute to poor decision making, reliance on maladaptive behavioral responses, and if exposure to aggression has been high, a reliance on aggressive responses to the perception of threat (e.g., De Bellis, 2001; Galvan, 2017; Steinberg, 2017).

f. Furthermore, across adolescent development, brain structural and network changes occur contributing to premature aging of brain cellular structures; narrowed adaptability; and resulting disruptions in cognitive development that impact attention, learning and memory, executive functioning, and emotional control. This together fosters less capacity to learn new strategies for thinking and acting, increased impulsivity and hyperarousal to threat, and changes in visual perceptual engagement that then lead to misattributions in social cues and how events are understood to have occurred (De Bellis & Zisk, 2014; Galvan, 2017).

6. Notably, research has indicated that individuals who experience maltreatment and modelling of poor social development, including aggression and disrupted emotion regulation, are much more vulnerable to experiencing and then having protracted impact of head injuries. The impact of such neurological trauma, across age, contributes to alterations in brain size and communication patterns, particularly in regard to those areas most involved in the development of emotion and behavioral regulation, and problem solving (i.e., alterations in frontal development and subcortical structures, that affect regulation and problem solving; and the corpus callosum, that affects transmission of information across brain hemispheres). These are structural and microstructural alterations that contribute to inflexibility, inattention to detail, failures in strategy identification and implementation, and poor choices, including increased risk engagement (Galvan, 2017; Hunter & Sparrow, 2012). This is represented behaviorally in such an ongoing poor capacity for learning without scaffolding and support, which

leads to low grades, decreased motivation, truancy, and higher early dropout rates; a greater incidence of cognitive disabilities; impulsivity and aggression; constant perceived threat and poor decision making to manage this threat; a heighted vulnerability to repeat abuse; and misperceptions of others intentions that affect social relationships and underlying trust (Galvan, 2017; Hunter & Sparrow, 2012).

7. Additionally, there is the need to consider, given the implications of Mr. Owens' developmental history, likely polysubstance exposure in utero and its impact on early brain development (Amgalan, et al., 2021; Lees, et al., 2020; McLachlan, et al., 2020; Ross, et al., 2015; Roussotte, et al, 2010).
    a. *Summary of findings:*
        i. Polysubstance exposure during the fetal period, particularly the first two trimesters, but actually across all three, contributes to alterations in brain development at the metabolic and structural levels, leading to smaller brain volume, disruptions in the development of subcortical to frontal systems in regard to regulation and network functionality – this contributes to early emerging hyperactivity, inattention, impulsivity, poor emotion regulation, and challenges with self-control and problem solving across the lifespan.
        ii. Alcohol has the strongest known effects of toxicity; as does nicotine. Deficits in cognitive development, including ID to borderline intellectual functioning are commonly seen as an outcome, as well as ADHD and significant learning disorders. Mood challenges, including anger, aggression, and disinhibition frequent.
        iii. Use of opiates adds to this effect. Add in poor nutrition and neglect and have multiplicative effects on brain development regarding regulation, cognition, and behavior.
        iv. Binge use appears to contribute, with alcohol in particular, to worse outcomes. But severity of impact is seen variably across all exposures.

V. Opinions regarding Mr. Owens' history and mitigating circumstances:

a. Mr. Owens has experienced the following indications of intergenerational trauma, from both his maternal and paternal sides, that have a significant impact on his brain development and subsequent opportunity to develop appropriate behavioral and neurocognitive adaptive responses:
    i. Maternal and paternal history of domestic and interpersonal violence that is described across multiple generations of their families and have contributed to an ongoing legacy of violence and aggression as appropriate responses to stress and challenge.
    ii. Poverty and neglect across generations, but specifically relevant to Mr. Owens own developmental history.
    iii. Abandonment by his biological father.

iv. Aggression and violence committed towards Mr. Owens himself across childhood and adolescence, including acts of significant aggression and multiple head traumas perpetrated by step-father and others in his life.
v. Aggression and trauma modeled as the appropriate engagement in social and interpersonal conflicts. Aggression used to ensure that this is also the choice made, through actions by his step-father and observations of multiple family members (including his maternal grandmother).
vi. Community violence and trauma were the developmental norm environmentally.

b. Intergenerational substance use and abuse across both the maternal and paternal sides of Mr. Owens' biological family
   i. Use of polysubstances by adults and peers, including alcohol, cannabis, nicotine, stimulants, and likely other substances.
   ii. Drug dealing as principal vocations of multiple family members
   iii. Impact of polysubstance exposure during gestational development impacting brain system organization
   iv. Use of substances during key periods of development, inhibiting more adaptive brain organization and systems development
c. Intergenerational incarceration has been the modeled norm for Mr. Owens
   i. Records show that his maternal grandmother was incarcerated for gun violence towards others
   ii. Both Mr. Owens' biological father and stepfather experienced multiple incarcerations for violence and substance abuse
   iii. Both of Mr. Owens' biological siblings have been incarcerated for violence
d. Mr. Owens received inadequate education addressing his underlying cognitive disabilities, that were identified by the school district and led to his placement in special educational services. He also was truant from school repeatedly, leading to an inability to take advantage of these interventions. The underlying reasons for these disabilities are multiply determined, but related to readily identified neurological differences and vulnerabilities described intergenerationally for Mr. Owens in the records reviewed:
   i. Records indicate a history of poor to limited education for his grandparents and parents
   ii. His maternal uncle has been identified as intellectually disabled – because of his maternal grandmother's own likely substance use and abuse as someone who was a bootlegger, there is a strong question that this may be due to fetal alcohol or polysubstance exposure
   iii. Mr. Owens' parents were both known to use/abuse substances, which raised the likelihood of prenatal disruption in neural organization secondary to their use during his gestation; this

heightened significantly his own risk for learning and neurodevelopmental disabilities.

iv. All of the siblings born after Mr. Owens are intellectually disabled and this is a further expression of the likely risks that are present genetically and environmentally.

v. All family members had poor capacity for learning at school – these likely reflect both genetic, exposure, and environmental factors shared intergenerationally.

e. Further considerations of risk for Mr. Owens include:

i. His premature birth and its impact on the expression of his neurodevelopmental vulnerabilities.

ii. From birth – he experienced inadequate care, poor nutrition, poverty effects, likely issues with attachment due to his mother's own history of abuse and neglect, and significant maltreatment. These are critical events that impact how the brain develops and is able to effectively contribute across time to maturity in emotion regulation and executive functioning, key considerations regarding his incarcerations and sentencing.

iii. As discussed, the environment Mr. Owens grew up in contributed to significant exposures to violence and aggression, both modeled within the family and among those in his community. Additionally, further impacting brain development and adaptations to the environment, Mr. Owens was exposed in his immediate environment to modeling of substance abuse, and because an early user and abuser of substances; these are known to hamper and disrupt brain development across time, limiting options for effective control and information processing, particularly in a brain that is already neurodevelopmentally impacted.

iv. He underwent removal from his biological home and was placed into foster care through DSS, with a family that abused him psychologically. This added to his already significant history of maltreatment to that point, and further contributed to disruptions in behavioral and emotion regulation development, as well as provided additional support to his understanding of his world as threatening and nonsupportive.

v. Mr. Owens was maltreated not only by his mother, but more significantly by his stepfather, who was known to be violent and aggressive, and expected similar behavioral choices and responses by Mr. Owens and his siblings. He experienced physical and psychological abuse from this individual, as well as in response to choices made by his stepfather. These led to disturbances in behavioral and regulatory choices across time, as well as ongoing stress that hampered his already impacted neurodevelopment. It also contributed to early experiences of brain injury, that further affected his brain development.

vi. As described above, he had poor school attendance with limited supports ultimately made available to him. This meant that opportunities for building more effective brain development and fostering greater engagement with underlying brain plasticity were unavailable to him. Indications of underlying disruptions in his neurodevelopmental capacities were identified, but were hampered in terms of intervention.
    1. He showed early need for speech therapy, which is representative of the likely early insult to his brain he experienced.
    2. He presented during elementary school with a profile of low average IQ with poorer verbal capabilities, and identification of Math and Verbal Learning Disabilities. These diagnoses are consistent with the imaging done by Dr. Gur, with regard to the specific profile of structural abnormalities he presents with neurologically.
    3. He was identified from early in school as showing behavioral and attention issues, again indicative of the neurodevelopmental disorder he presented with as a result of his multiple vulnerabilities, as well as the neurological abnormalities he presented with on imaging.
    4. He engaged in angry outbursts and aggression consistent with his poor regulatory capabilities, which again reflects the intersection of his neurodevelopmental vulnerabilities and the lack of appropriate environmental supports, and is a direct reflection of his underlying neurodevelopmental disabilities.
    5. His record indicates multiple repeating of grades and his ultimate dropout from high school at the 9th grade; this is a culmination of his poor support academically coupled with his own truancy.

vii. Mr. Owens has experienced multiple cumulative concussions secondary to head trauma, from early age due to physical abuse and fights; and these have led to multiple incidences of loss of consciousness (LOC), an indication of severity of the head injury. Repeat concussions with LOC are indicative of greater risk for increased alterations in frontal and temporal brain development; these alterations will affect regulation, attention, and problem solving. They additionally have a heightened impact on an already neurodevelopmentally affected brain, leading to both observed structural abnormalities seen on neuroimaging as well as in the profile of deficits observed across his neuropsychological assessments.

viii. Notably, records from the state Department of Corrections indicated that historically, Mr. Owens had seizures. These can very well reflect his concussions and history of early brain impact from

prematurity and trauma, as well as be the result of his underlying risk being exacerbated by his history of substance use/abuse. Seizures are frequently seen in neurodevelopmentally disrupted brains, as a symptom of the structural abnormalities that occur.

ix. Mr. Owens presents with symptoms historically of anxiety, depression, and paranoia in his records. These are representative of the interaction of his environmental and intergenerational exposures to maltreatment, violence, aggression, and neglect, and likely as well underlying genetics, as a history of mood disorders is also identified among other family members. They are also commonly experienced reactions to his trauma and neurodevelopmental history, including his poor social attachments and supports. Notably, these emotional disorders were not well identified and were poorly treated until he was incarcerated; however, when he released from incarceration when he was an emerging adult, he no longer was provided treatment. This meant that his vulnerable brain, already challenged through the experience of incarceration, was no longer being supported in terms of mood and regulatory demands. This left him further vulnerable to relying on his deficits in emotion regulation and problem solving, and at risk for maladaptive responses to challenge in the environment, as was ultimately seen.

x. Supporting the significance of his underlying mood and behavioral challenges were his acts of self-harm (cutting), which reflects the underlying difficulties he has repeatedly shown developmentally with regard to:
    1. Impulsivity
    2. Anger and aggression
    3. Depression
    4. Anhedonia

xi. He has also shown a history of poor social engagement and limited relationships, that reflect the impact of both his underlying neurodevelopmental disorder, that reflects a restricted profile of brain development, and his maltreatment. This has led to the following deficits that further impact how he is able to judge demands and challenges and how they are responded to:
    1. Lack of trust
    2. Poor capacity to regulate
    3. Misread affect and social cues
    4. On guard always, prepared for attack and threat

xii. Previous evaluations consistently show challenges with aspects of executive functioning and verbal memory; visual memory for socially relevant information (challenges with reading affect), dexterity issues are likely due to changes in transfer of information across hemispheres to support fine motor planning and sequencing (frontal and temporal). These findings were additionally supported

by those of Dr. Gur on neuroimaging, across MRI and PET findings. That these were not found on qEEG results from Dr. Evans' evaluation is in fact not surprising. qEEG is not considered an appropriate diagnostic tool for identifying or understanding complex structural and developmental differences in individuals due to a lack of specificity for any particular form of brain difference – injury, developmental psychopathology, and normal developmental differences are all seen similarly and are indistinguishable by qEEG testing; and studies are typically of low quality and poor power, e.g., Krull, et al., 2009). Instead, MRI and PET are considered gold standard procedures diagnostically in neurology and neuropsychology for addressing both physical and developmentally differences (Amyot, et al., 2015).

xiii. Finally, during his incarceration at 15 – Mr. Owens experienced substantial violence and aggression, and resulting fear – which served to heighten and further challenge his already present vulnerabilities as well as diminished capacity for learning new potential outcomes. This experience reinforced the threat and increased disruption to his neural development, and contributed to altered and inhibited frontal lobe development. This has been resulted in the findings presented by Dr. Gur, and contributes further to understanding how, at age 19, Mr. Owens was not neurodevelopmentally normal.

Therefore, it is the opinion of this expert, to a significant degree of neuropsychological and psychological certainty, that the accumulated neuropsychological and neuroimaging data serve to highlight that Mr. Owens is an individual with a complex neurodevelopmental disorder, that has severely impacted his range of capacities for making effective adaptive choices, regulating his emotional experience when under stress and perceived threat, and with being developmentally able to make effective, prosocial, and mature problem solving responses. These are chronic alterations in development and have limited his range of opportunities, particularly in response to the challenges experienced with his ongoing maltreatment, neglect, exposure to violence, and resulting trauma, all of which have been poorly addressed over time. Taken together, these sequential insults have contributed to the expression of a history of multiple levels of brain damage, macrostructurally and microstructurally, that have left Mr. Owens vulnerable across time to significant disruptions in maturation and opportunity. He ultimately missed a significant period of potential plasticity neurodevelopmentally, as well as in regard to obtaining behavioral intervention and support, that might have allowed greater adaptation and better choices to managing what has confronted him environmentally. This was most clearly the case for him during his adolescent incarceration. His cumulative history of insult neurodevelopmentally, poor support and educational engagement, trauma and physical violence perpetrated on him, and ongoing experiences of threat and a belief that he must defend against that threat left him, at the time of his crime, unable to rely on effective problem solving capacities and regulatory "brakes" that would have been present for someone who is neurotypical in their

development. His judgment and capacity for making effective choices was severely limited as a result of his neurodevelopmental immaturity at age 19; this would have been the case even had he not also experienced the plethora of neurodevelopmental challenges present in his history.

What is also clearer now than at the time of his trial and sentencings, given both our understanding of how adolescent and emerging adult neurodevelopment unfolds, and as a consequence of his incarceration to date, is that Mr. Owens does demonstrate a potential for improved opportunity behaviorally and neurocognitively, with the provision of structure and support he requires. During his incarceration, he has been treated pharmacologically for his underlying mood and behavioral challenges, that are a byproduct of his neurodevelopmental differences. This supports the resilience his brain still holds for developing more effective efforts at engagement and choice with life demands. He has been able to reduce the engagement of provoked poor behavior at times, because his experience of immediate threat is reduced and controlled. His experience growing up was to confront constant feelings of emotional threat and a need for safety with protective actions; this has been reduced as he has been able to experience less direct threat. Additionally, when he has had the opportunity to receive and participate in psychological and socially based interventions, that can help build greater capacity for self-efficacy and self-regulation, he is able to develop more adaptive responses to situations and challenges that previously were much more difficult to regulate and manage when experiencing feelings of extreme threat and its resulting paranoia. Given his developmental environment, and the lack of both familial and educational supports he required, these were opportunities missed developmentally; with the structure that his incarceration can ultimately provide, as a result of reduced adaptive and cognitive demands and a more regimented set of expectations and experiences placed before him daily. There is now a chance to insure that his negative behavior in the past can be examined and more adaptive responses engaged. While someone with a clear neurodevelopmental disorder, he also retains the capacity, through a trauma-informed set of interventions and engagements, to become a more effective individual who is not solely "damaged for life."

Respectfully submitted,

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Cited Literature:

American Association on Intellectual and Developmental Disabilities (AAIDD) and The ARC. (2014). Position Statement on Criminal Justice. In AAIDD, American Association on Intellectual and Developmental Disability (2020). *Position Statements of the American Association on Intellectual and Developmental Disability.* (pp. 21-22). Washington, DC: AAIDD.

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Steinberg, L. (2014). *Age of opportunity: lessons from the new science of adolescence*. NY: Mariner Books.

Steinberg, L. (2017). Adolescent brain science and juvenile justice policymaking. *Psychology, Public Policy, and Law, 23*, 410-420.

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CERTIFICATION

Under penalties as provided by law (pursuant to Section 1-109 of the Illinois Code of Civil Procedure), the undersigned swears and certifies that the statements set forth in this affidavit are true and correct, except as to matters therein stated to be on information and belief and as to such matters the undersigned certifies as aforesaid that he/she verily believes the same to be true.

6/3/2021
Date

SCOTT J. HUNTER, PhD

Cathy A Zorba 6/3/21

"OFFICIAL SEAL"
CATHY A. ZORBA
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES 8/3/2021

Curriculum Vitae (Revised 6/2021)

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Date of Birth: September 2, 1963
Place of Birth: Los Angeles, CA
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Current Professional Appointments and Positions:

7-2021 to present	*Alternate Member (Elected)*, UChicago Medicine and Biological Sciences Faculty Advisory Committee, Clinician-Educator Slate
11-2020 to present	*Chair-Elect*, Board for the Advancement of Psychology in the Public Interest, Public Interest Directorate, American Psychological Association, Washington, DC
7-2019 to present	*Faculty Member and Ethics Attending*, The MacLean Center for Clinical Medical Ethics, The University of Chicago Medicine and Pritzker School of Medicine, The University of Chicago
7-2016 to present	*Professor*, Departments of Psychiatry and Behavioral Neuroscience (Section of Child and Adolescent Psychiatry), and Pediatrics (Sections of Pediatric Neurology and Developmental and Behavioral Pediatrics) Biological Sciences Division and Pritzker School of Medicine, The University of Chicago
10-2014 to present	*Vice-Chair*, Institutional Review Board, The University of Chicago Medicine and Biological Sciences Division
10-2011 to present	*Director*, Neuropsychology Program, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago Medicine and Comer Children's Hospital
2-2011 to present	*Faculty Affiliate*, The Center for Health and the Social Sciences (CHeSS), The University of Chicago
7-2002 to present	*Coordinator*, Child Psychology Training, Department of Psychiatry and Behavioral Neuroscience, Section of Child and Adolescent Psychiatry, The University of Chicago

Education:

1977-1981		H-B Woodlawn Secondary Program, Arlington, VA
1981-1983		The College of William and Mary, Williamsburg, VA
1986	**BA**	Psychology and Biology, The Catholic University of America, Washington, DC
1992	**MA**	Clinical and Developmental Psychology, University of Illinois at Chicago
1995-1996		Clinical Psychology Internship (APA Accredited), Stone Institute of Psychiatry, Northwestern University Medical School, Chicago, IL
1996	**PhD**	Clinical and Developmental Psychology (APA Accredited), University of Illinois at Chicago

1996-1997	Postdoctoral Fellowship in Pediatric Neuropsychology & Developmental Disabilities, Leadership Education in Neurodevelopmental and Related Disabilities (LEND), Departments of Neurology & Pediatrics, University of Rochester School of Medicine, Rochester, NY
2018	Warner-Reynolds Foundational Leadership Program, Office of Faculty Affairs, The University of Chicago Medicine and Biological Sciences, Chicago, IL
2018-2019	Fellowship, MacLean Center for Clinical Medical Ethics, Pritzker School of Medicine, Biological Sciences Division, The University of Chicago, Chicago, IL

Licensure and Credentials:

Clinical Psychologist, State of Illinois, #071-005921 (1999-present)
Clinical Psychologist - Health Service Provider in Psychology (HSPP), State of Indiana, #20041494A (1999-present)
Clinical Psychologist, State of Michigan, #6301018369 (2020-present)
Clinical Psychologist, Commonwealth of Virginia, #081-002623 (1998-present)
E.Passport (Telehealth), PSY|PRO, Association of State and Provincial Psychology Boards (2020-present)
National Register of Health Service Psychologists, #50557 (1999-present)

Academic and Professional Honors:

1985	Pi Gamma Mu Honorary Society in Social Sciences, CUA
1985	Psi Chi, CUA
1986	Distinguished Major Award, Department of Psychology, CUA
1986	Who's Who Among Students in American Colleges and Universities
1990	Commendation, Clinical Psychology Preliminary Examination, UIC
1990-1993	University of Illinois Graduate Research Travel Award
1995	Henri Hecaen Award for Graduate Research in Neuropsychology, APA/APF
1996	LEND (Leadership Education in Neurodevelopmental Disabilities) Fellow, University of Rochester, Department of Pediatrics, Strong Center on Developmental Disabilities-University Affiliated Program (UAP)
2005	Fellow nominee, National Academy of Neuropsychology
2006	Chair's Award for Outstanding Faculty Scholarship, Department of Psychiatry, The University of Chicago
2006	Chair's Award for Outstanding Faculty Citizenship, Department of Psychiatry, The University of Chicago
2007	Admitted to Sigma Xi, The University of Chicago Chapter
2007	Chair's Award for Outstanding Faculty Scholarship, Department of Psychiatry, The University of Chicago
2008	Chair's Award for Most Outstanding Faculty Member, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago
2010	Chair's Award for Most Outstanding Faculty Member, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago
2011	Chair's Award for Outstanding Faculty Teaching, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago
2012	Chair's Award for Outstanding Faculty Scholarship, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago
2013	Chair's Award for Outstanding Faculty Scholarship, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago
2014	Chair's Award for Outstanding Faculty Scholarship, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago

Professional Experience:

Previous Research, Academic, and Administrative Positions:

10-1984 to 5-1985	Research Assistant, Assessment of Social Anxiety Project, Department of Psychology, Catholic University of America, Washington, DC; PI's: Carol Glass, PhD & Diane Arnkoff, PhD
5-1985 to 12-1985	Laboratory Assistant, Energetics of Attention in Alzheimer's Disease Project, Cognitive Neuroscience Laboratory, Catholic University of America, Washington, DC; PI: Raja Parasuraman, PhD
1-1986 to 6-1986	Intern in Research and Reporting, Psychology Today, American Psychological Association, Washington, DC
6-1986 to 8-1988	Research Assistant, Unit on Psychophysiology, Laboratory of Psychology and Psychopathology, National Institute of Mental Health, Bethesda, MD; PI: Connie C. Duncan, PhD
9-1988 to 8-1994	Research Assistant, Developmental Psychophysiology Laboratory, Developmental and Behavioral Neurosciences Program, Institute for the Study of Developmental Disabilities and Department of Psychology, University of Illinois at Chicago; PI: Rathe Karrer, PhD
5-1989 to 7-1990	Research Assistant, Men's Sexuality and Social Issues Studies, Department of Psychology, University of Illinois at Chicago; PI's: David McKirnan, PhD & Joseph Stokes, PhD
6-1990 to 8-1991	Research Assistant, UIC Stop Smoking Project, Prevention Research Center, University of Illinois at Chicago; PI: Robin Mermelstein, PhD
7-1994 to 6-1995	Research Assistant, Rush Human Performance Laboratory, Isaac Ray Center and Rush Institute for Mental Well-Being, Rush-Presbyterian-St. Luke's Medical Center, Chicago, IL; PI's: Abigail Sivan, PhD & Howard Kravitz, D.O., MPH
7-1994 to 8-1996	Statistician/Data Manager, Bosnian Mental Health Needs Assessment Project, Department of Psychiatry, Rush-Presbyterian-St. Luke's Medical Center, Chicago, IL; PI: Abigail Sivan, PhD
6-1996 to 8-1996	Visiting Research Specialist in Developmental Disabilities, Mental Health Program, Institute on Disability and Human Development, University of Illinois at Chicago
9-1996 to 8-1997	Postdoctoral Fellow (Research), Movement and Inherited Neurologic Disorders Unit, Department of Neurology, University of Rochester School of Medicine and Dentistry, Rochester, NY
8-1997 to 10-1998	Assistant Director, Learning Needs and Evaluation Center, Center for Counseling and Psychological Services, Department of Student Health, University of Virginia, Charlottesville, VA

9-1997 to 9-1999	Assistant Professor, Department of Psychiatric Medicine, University of Virginia Health Sciences Center, Charlottesville, VA
10-1997 to 9-1999	Adjunct Assistant Professor, Program in Clinical and School Psychology, Curry School of Education, University of Virginia
10-1998 to 9-1999	Director, Learning Needs and Evaluation Center, Center for Counseling and Psychological Services, Department of Student Health, University of Virginia, Charlottesville, VA
3-2000 to 5-2001	Associate Director, Clinical Psychology Training Program, Department of Psychiatry, The University of Chicago
6-2001 to 6-2002	Director, Clinical Psychology Training Program, Department of Psychiatry, The University of Chicago
5-2006 to 1-2007	Interim Co-director, Clinical Psychology Training Program, Department of Psychiatry, The University of Chicago
10-1999 to 6-2007	Assistant Professor, Department of Psychiatry, Biological Sciences Division and Pritzker School of Medicine, The University of Chicago
1-2007 to 6-2007	Assistant Professor (Secondary Appointment), Department of Pediatrics, Biological Sciences Division and Pritzker School of Medicine, University of Chicago
10-1999 to 9-2011	Director, Pediatric Neuropsychology Service, Department of Psychiatry & Behavioral Neuroscience, Section of Child and Adolescent Psychiatry, The University of Chicago
6-2009 to 6-2012	Director, Clinical Psychology Training Program, Department of Psychiatry & Behavioral Neuroscience, Pritzker School of Medicine, The University of Chicago
7-2007 to 6-2016	Associate Professor, Department of Psychiatry & Behavioral Neuroscience, Biological Sciences Division and Pritzker School of Medicine, University of Chicago
7-2007 to 6-2016	Associate Professor (Secondary Appointment), Department of Pediatrics, Biological Sciences Division and Pritzker School of Medicine, University of Chicago

Previous Clinical Positions:

9-1983 to 7-1984	Bereavement Counselor, Hospice of Northern Virginia, Arlington, VA
1-1989 to 12-1989	Intake Assistant, Office of Applied Psychological Services, Department of Psychology, University of Illinois at Chicago
3-1989 to 10-1993	Group Services Supervisor and Facilitator, AIDS/HIV Services Program,

	Horizons Community Services, Chicago, IL
1-1990 to 6-1990	Psychodiagnostic and Group Therapy Extern, Department of Psychiatry, Section of Child Psychiatry, Rush-Presbyterian-St. Luke's Medical Center, Chicago, IL
6-1990 to 7-1991	Neuropsychological Assessment Extern, Pediatric Neuropsychology Laboratory, Section of Child and Adolescent Psychiatry, Departments of Psychiatry and Pediatrics, The University of Chicago
6-1990 to 8-1991	Group Counselor, UIC Stop Smoking Project, Prevention Research Center, University of Illinois at Chicago
7-1990 to 6-1991	Extern, Office of Applied Psychological Services, Department of Psychology, University of Illinois at Chicago
1-1991 to 8-1993	Clinical Assistant, Mental Health Program, Institute for the Study of Developmental Disabilities, University of Illinois at Chicago
7-1991 to 6-1992	Advanced Clinical Trainee, Office of Applied Psychological Services, Department of Psychology, University of Illinois at Chicago
7-1991 to 12-1992	Extern, Center for Cognitive Therapy, Department of Psychiatry, The University of Chicago
7-1991 to 6-1994	Staff Psychometrician, Pediatric Neuropsychology Laboratory, Section of Child and Adolescent Psychiatry, Departments of Psychiatry and Pediatrics, The University of Chicago
12-1994 to 6-1995	Consulting Clinical Assistant, Mental Health Program, Institute on Disability and Human Development, University of Illinois at Chicago
7-1995 to 7-1996	Clinical Psychology Intern (APA Approved), Stone Institute of Psychiatry, Department of Psychiatry and Behavioral Sciences, Northwestern University Medical School, Chicago, IL
9-1996 to 6-1997	Consulting Neuropsychologist, Board of Cooperative Special Education Services (BOCES), Monroe County #1, Fairport, NY
9-1996 to 8-1997	Pediatric Neuropsychology and Developmental Disabilities LEND Fellow, Strong Center for Developmental Disabilities UAP, Department of Pediatrics, University of Rochester School of Medicine and Dentistry, Rochester, NY
8-1997 to 9-1999	Staff Clinical Psychologist, Center for Counseling and Psychological Services, Department of Student Health, University of Virginia, Charlottesville, VA
10-1998 to 9-1999	Clinical Neuropsychology Private Practice (part-time: 10 hours/week),

Health Point Behavioral Health Services Network, Charlottesville, VA

Professional Service:

Editor:

Pediatric Neuropsychology Interest Group Newsletter (e-journal), 2002-2004
Behavioral Sciences, 2016-2019 (Editor-in-Chief)

Associate Editor:

Frontiers in Psychology – Neuropsychology, 2021-present
Behavioral Sciences (2010-2016)

Editorial Board:

Behavioral Sciences, 2010-2019 (Academic Editor, 2016)
Child Psychiatry and Human Development, 2012-present
Journal of Pediatric Epilepsy, 2016-present

Action Editor:

SageOpen Behavioral Sciences Journal, 2014

Guest Editor:

Special issue on learning and memory in neuropsychiatric disorders, *Behavioral Sciences*, 2013

Special issue on neuropsychological evaluation and neuropsychiatric treatment in children with Epilepsy (with Megan Scott, PhD), *Journal of Pediatric Epilepsy*, 2016

Special issue on socioeconomic adversity, neurodevelopment and resilience, *Behavioral Sciences*, 2016-17

Ad-hoc/Invited Reviewer:

Peer-reviewed Journals:

American Journal of Public Health
Anesthesia and Analgesia
Behavior Modification
Behavioral Sciences
Cancer
Child Neuropsychology
Clinical Psychology Review
Developmental Medicine and Child Neurology
Developmental Neuropsychology
Doody's Health Sciences Book Review Annual
Frontiers in Psychiatry (Section of Child and Adolescent Psychiatry)
Journal of Abnormal Child Psychology
Journal of Attention Disorders
Journal of Child and Adolescent Psychopharmacology
Journal of Developmental and Behavioral Pediatrics
Journal of Health Care for the Poor and Underserved
Journal of Learning Disabilities
Journal of Neuropsychiatry and Clinical Neurosciences
Journal of Pediatric Epilepsy
Journal of Pediatric Psychology
Journal of the American Academy of Child and Adolescent Psychiatry
Journal of the International AIDS Society
Journal of the International Neuropsychological Society

Journal of Theoretical Social Psychology
Kidney International
Medical Case Studies
Neurology
Pediatrics
Pediatric Neurosurgery
Psychopharmacology
PsycCritiques-Contemporary Psychology
Research on Child and Adolescent Psychopathology
Sleep
Sleep Medicine

Textbooks:

John Wiley & Sons, Inc. Publishers (Psychology Division)
Psychology Press (Neuropsychology Series)
Cambridge University Press (Medicine and Neurosciences Series)
Palgrave Macmillan (Science Series)

Grant Reviewer:

US Department of Health and Human Services:
Health Resources and Services Administration (HRSA) Grants:
Ryan White Part C Grants – 2012
13-139 Maternal and Child Research Grant Program – 2012
13-195 MCH Autism Intervention Research Program – 2013
14-037 MCH Autism Intervention Research Program – 2014
14-091 MCH Adolescent and Young Adult Health Research Network – 2014
16-029 Maternal and Child Health Secondary Data Analysis Studies (SDAS) Program – 2016
17-090, MCH Adolescent and Young Adult Health Research Network (AYAH-RN) – 2017
Danish Council for Independent Research/Humanities, Danish Agency for Science Technology and Innovation:
Sapere Aude: DFF Advanced Grant (Level 3) – 2013
Women in Science Advanced Grant – 2014
United Kingdom Medical Research Council (MRC) – 2013
Third Coast Center for AIDS Research in Chicago (TC-CFAR) Pilot Grant Program – 2016; 2017; 2019; 2020
Institute for Translational Medicine (ITM), The University of Chicago – 2020
Great Plains IDeA - Clinical and Translational Research (CTR), University of Nebraska Medical Center, Team Research Pilot Projects Program - 2021

Professional Consultation:

Psychological Assessments, Riverside Publishing Co., Itasca, IL –
Psychometric consultation on Stanford-Binet Intelligence Test-Fifth Edition (SB-V; 1999-2001)
Jensen Learning Corporation, San Diego, CA –
Neuroscience of ADHD reviewer and lecturer (2001)
Kirby School District #140, Tinley Park, IL –
Special education programming consultant (2001-2002)

Seneca Consolidated High School District #160, Seneca, IL –
Special education programming consultant (2001-2003)
Chicago Neuropsychology Group (Robert Heilbronner, PhD), Chicago, IL –
Pediatric neuropsychology civil litigation consultant (2002-2005)
St. Charles Illinois Consolidated School District #303 –
Special education programming consultant (2002-2009)
Isaac Ray Forensic Group, LLC (Diane Goldstein, PhD), Chicago, IL –
Pediatric neuropsychology criminal litigation consultant (2003-2004)
Council of Healthcare Advisors, Gerson Lehrman Group, New York, NY –
Financial risk consultant - Neuroscience (2004-2010)
UCB, Inc., Smyrna, GA/UCB SA, Brussels, Belgium –
Psychometric consultation (2004-2010)
Neurocognition Advisory Board member (2006-2010)
Berwyn School District #10, Berwyn, IL –
Special education programming consultant (2005-2006)
Eisai Global Clinical Development Inc., Neuroscience PCU, Ridgefield Park, NJ –
Psychometric consultation (2009-2010)
ProPhase, New York, NY – Research and Training Consultant (2009-2017)
MedAvante-ProPhase, Hamilton, NJ – Clinical Leadership Team, Psychiatry and Neurodevelopment
(2018-present)

Academic Responsibilities:

*Courses Taught/Guest Lectures Presented: (*courses and lectures currently being taught yearly)*
Abnormal Psychology (UIC)
Advanced Psychological Assessment Seminar (UVA)
Developmental Psychology (UIC)
Introduction to Pediatric Neuropsychology (UC)
Introduction to Neuropsychology (UR, UC)
Psychological Testing for the Nonpsychologist (UC)
Seminar in Developmental Disabilities (UIC, UR)
Structured Assessment Approaches to Child Psychopathology (UC)*
Cognitive-Behavioral Therapy with Children and Adolescents (UC)
Human Behavior in Health and Illness – Infancy, Early and Middle Childhood Development series
(Psychiatry 305; Pritzker Medical School, UC)
Cognitive Development Sequence, Psychiatry Residency Course (UC)*
Neuropsychological Assessment Sequence, Third Year Medical Rotation Psychiatry Course (UC)*
Developmental Psychopathology Series, Core Summer Course, Child Psychiatry Fellowship (UC)
Pediatric Clinical Neuroscience Seminar (UC)*
Psychological Assessment, Second Year Psychiatry Resident Course (UC)*
Cultural Psychiatry, Second Year Psychiatry Resident Course, Lecture on LGBTQ Diversity (UC)
Community Health Cluster Group Seminar, Pritzker Medical School (UC)
Advanced Child Cognitive Behavioral Therapy Seminar (UC)
The Doctor-Patient Relationship (Small Group Discussions: Psychiatric Ethics; Pediatric Ethics)
(Pritzker Medical School, UC)*
Considering Trauma within Pediatric Neuropsychological Assessment
(Trauma Treatment Seminar, UC)*
LGBTQ Youth and Homelessness (Clinical Psychological Ethics, UW-M)
Clinical Medical Ethics Case Conference (MacLean Center for Clinical Medical Ethics, UC)*
Social Media and Psychological Practice (UC)*
cf., UIC – University of Illinois at Chicago; UR – University of Rochester; UVA – University of Virginia;

UC – The University of Chicago; UW-M – University of Wisconsin, Milwaukee

Teaching Assistant:
Writing for Psychology (UIC)

Clinical and Research Supervisor:
Undergraduate Research Practicum, Department of Psychology, UIC, 1993-1995
Psychotherapy Externship, Institute on Disability & Human Development Mental Health Program, UIC, 1994-1996
Child Psychology Internship (Neuropsychology Rotation), Department of Psychiatry, University of Rochester, 1996-1997
Clinical Neuropsychology Postdoctoral Fellowship, Department of Psychiatric Medicine, University of Virginia Health Sciences Center, 1997-1999
Clinical Psychology Internship, Center for Counseling and Psychological Services, University of Virginia, 1997-1999
Clinical Psychology Postdoctoral Fellowship, Center for Counseling and Psychological Services, University of Virginia, 1997-1999
Clinical Psychology Residency (Neuropsychology Rotation), Department of Psychiatric Medicine, University of Virginia Health Sciences Center, 1998-1999
Reader for Undergraduate Honors Thesis, Department of Psychology, University of Virginia, 1998-1999
Pediatric Neuropsychology Practicum, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago, 1999-present
Child Clinical Psychology Internship, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago, 1999-present
Psychotherapy Rotation, Adult Psychology Internship, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago, 2000-present
Neuropsychology Postdoctoral Training Program, Department of Psychiatry, The University of Chicago, 2000-2006
Pediatric Consultation-Liaison Rotation, Department of Psychiatry, The University of Chicago, 2005-2008
Undergraduate Thesis Advisor, Department of Psychology, The University of Chicago, 2005-present
Research Advisor, Pharmakon, The University of Chicago, 2012-2015
Pritzker Medical School Scholarship and Discovery Program Mentor, The University of Chicago, 2011-present
Psychotherapy Internship, University of Illinois at Chicago Psychiatric Nursing APN Training Program, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago, 2017-present
Clinical Ethics Attending, MacLean Center for Clinical Medical Ethics, The University of Chicago, 2020-present

Dissertation, Thesis, and Comprehensive Examination Committee Memberships:
Finch University of Health Sciences/Chicago Medical School (Clinical Psychology):
Cari Silberfein (*comprehensive examination*)
Chicago School of Professional Psychology (Clinical Psychology) :
Kathleen Ares (*doctoral dissertation*)
Jenalyn Weilnhammer (*doctoral dissertation*)
Columbia College Chicago (MFA-Sustainable Architectural Design):
Diana Tychsen (*master's thesis*)
DePaul University (Clinical/Community Psychology):
Courtney Bates (*comprehensive examination; doctoral dissertation*)

Jacquelyn Doxie (*doctoral dissertation*)
Silvia Henriquez (*doctoral dissertation*)
Illinois Institute of Technology (Institute of Psychology: Clinical Psychology):
Cynthia Kane (*doctoral dissertation*)
Lindsey Felix (*doctoral dissertation*)
Crystal Young (*doctoral dissertation*)
Katie Kaczynski (*doctoral dissertation*)
Clayton Hinkle (*doctoral dissertation*)
Kimberly McCue (*doctoral dissertation*)
Roosevelt University (Clinical Psychology):
Claudiu Dumitrescu (*doctoral dissertation*)
Thomas Farmer (*doctoral dissertation*)
Megan DiQuattro (*doctoral dissertation*)
Nicholas Hartley (*doctoral dissertation*)
Arianna Garagozzo (*doctoral dissertation*)
The University of Chicago (Undergraduate B.A., Psychology):
Alla Rubinstein (*honors thesis*)
Erika Gustafson (*honors thesis*)
Rebecca Thompson (*honors thesis*)
Tricia Nicholson (*honors thesis*)
Drew Landrowski (*honors thesis*)
The University of Chicago (Graduate Program in Public Health Studies):
Dale Smith, PhD (*master's thesis*)
The University of Chicago (MA Program in the Social Sciences [MAPSS]):
Monica Nadeau (*master's thesis*)
Peter Fantozzi (*master's thesis*)
Leyi (Lindsay) Kang (*master's thesis*)
University of Virginia (Clinical/School Psychology):
Dane Cherneco (*doctoral dissertation*)
Institute of Clinical Psychology, University of Karachi, Pakistan:
Hadia Serwat (*doctoral dissertation*)
Muhammad Moosa (ERUM) (*doctoral dissertation*)
Adler University (Clinical Psychology/Neuropsychology)
Tamara Bissesar (*doctoral dissertation)*

Research Mentorship:
The University of Chicago:
Undergraduate Research and Bachelors Honors Thesis Mentees
Alla Rubinstein (Psychology; 2005-2007)
Erika Gustafson (Psychology; 2010-2013)
Rebecca Thompson (Psychology/Neuroscience; 2017-2020)
Tricia Nicholson (Neuroscience; 2020-2021)
Drew Landrowski (Neuroscience; 2020-2021)

Master of Arts Program in the Social Sciences (MAPSS):
Monica Nadeau (2019-2020)
Peter Fantozzi (2020-2021)
Leyi Kang (2020-2021)
Marcus Quackenbush (2021-2022)

University of Illinois at Chicago Applied Psychology Program
Sheri Joscelyn (Fall 2012)*
Claire Crisman (Spring 2013)
Ahn-Thu Nguyen (Spring 2013)
Rugile Ramoskaite (Fall 2013)*
Jaeson Kaylegian (Fall 2013)*
Courtney Chamerski (Fall 2014)
Koren Cooper (Spring 2015)
Alexis Koth (Spring 2015)
Louis Calderone (Fall 2015)*
Jesus Solano (Spring 2016)*
Dimitra Papadakis (Spring 2016)
*Continued as research assistants following completion of the internship

Illinois Math and Science Academy Student Inquiry and Research Program
Jessica Dong (2006-2007)
Kevin Crews (2007-2008)
Jennifer Bailey (2010-2011)
Kevin Zhang (2011-2012)
Al-Jalil Gault (2012-2013)
Daniel Holley (2014-2015)
Alexa Tyszka (2015-2016)
Jaszmine Simmons (2015-2016)

Pritzker School of Medicine Scholarship and Discovery Research Trainees
Ernika Quimby (2011-2012; with Niranjan Karnik, MD, PhD, Co-Mentor)
Annie Lauer (2012-2013; with Niranjan Karnik, MD, PhD, Co-Mentor)
Scott Goldberg (2013-2014; with Niranjan Karnik, MD, PhD, Co-Mentor)
Joshua Piche (2015-2018)
Amol Naik (2015-2017)
Natalie Francis (2016-2019)
Daniel Dolan (2020-present)

Postdoctoral Fellows in Pediatric Neuropsychology
University of Virginia:
Michael Deem, PsyD (1997-1998)
Jennifer Maedgen, PhD (1998-1999)

The University of Chicago:
Bonnie Klein-Tasman, PhD (2000-2001)
Lisa Noll, PhD (2003-2005)
Cynthia Kane, PhD (2006-2009), *with the Section of Developmental & Behavioral Pediatrics*
Jennifer Edidin, PhD (2010-2012)
Sara Golomb, PhD (2010-2011)

Postdoctoral Mentorship in Multicultural Mental Health:
UChicago Medicine LGBTQ/HIV Health Clinic at Howard Brown Health Center Southside: The Village
Byron Brooks, PhD (2020-21)

Professional and Public Service Advisory Committee Memberships:

Professional Advisory Board, CHADD-Charlottesville/Albemarle County, VA, 1997-2000
Youth Violence Task Force, Charlottesville/Albemarle County, VA, 1998-2000
Board of Directors, Mental Health Association of Charlottesville/Albemarle County, VA, 1998-2000
Vice-President, 1999-2000
Urban Initiatives and AIDS Issues Monitor, Public Interest Advisory Committee, Division 40, American Psychological Association, 2000-2008
Conference Program Committee, Division 40, American Psychological Association, 2004-2007
Professional Advisory Council, International Dyslexia Association, Illinois Chapter, 2005-present
NF-1 Neurocognitive Interventional Study Committee, Neurofibromatosis Research Consortium, US Department of Defense, 2006
Scientific Review Committee, 2007 Annual Meeting, International Neuropsychological Society, 2006-2007
Children's Oncology Group, Behavioral Science Section, National Institutes of Health, 2007-present
Professional Advisory Board, Angelman Syndrome Foundation, 2007-2017
Liaison, Committee on Children, Youth and Families, Division 40, American Psychological Association, 2008-2012
Pediatric HIV/AIDS Cohort Study (PHACS), Behavioral and Neurological Development Workgroup, National Institutes of Health (NIH), 2009-2019
Opsoclonus-Myoclonus Syndrome (OMS) Workshop, NIH-NINDS and Pediatric OMS Research Fund, 2010
Professional Advisory Board, Forever Sibs (www.foreversibs.org), 2010-2020
Data and Safety Monitoring Board, Pediatric Acute Liver Failure Study Group (PALFSG), National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), National Institutes of Health (NIH), Bethesda, MD, 2011-2017
Member, Committee on Professional Practice and Standards (COPPS), Professional Practice Directorate, American Psychological Association, 2012-2015
Chair of COPPS, 2014
Coordinator, Guidelines on Social Media Usage, 2015-2017
Social Media Guidelines Writing Group, 2017-2019
Conference Program Review Committee, Division 12, American Psychological Association, 2013-14
Member (appointed), Task Force on Re-envisioning the Multicultural Guidelines for the 21st Century, Board for the Advancement of Psychology in the Public Interest (BAPPI), American Psychological Association, 2015-2017
Subject Matter Expert, Disruptive and Conduct Disorders, Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Mental Health Services (CMHS) Special Expert Panel Conference, July 2016
Member, Equitas Health Institute Midwest Sexual and Gender Minority (SGM) Health Research Consortium (2020-present)
Member (elected), Board for the Advancement of Psychology in the Public Interest (BAPPI), Public Interest Directorate, American Psychological Association, 2020-2022
Liaison, Committee on Children, Youth, and Families, 2020-2021
Monitor, Committee on International Relations in Psychology, 2020-2022
Member, Public Interest Awards Committee, 2020-2021
Chair-Elect, Executive Committee, 2021
Liaison, Ad-Hoc Committee on Health Equity, 2021-2022
Chair, Executive Committee, 2022

Departmental and University Service:

Graduate Student Mentor Program, Department of Psychology, UIC, 1989-1990
Student Representative, Committee on Graduate Studies and Graduate Student Council, Department of Psychology, UIC, 1989-1990 and 1992-1993
Executive Committee, Center for Counseling and Psychological Services, UVA, 1997-1999
Education Committee, Center for Counseling and Psychological Services, UVA, 1997-1999
Committee of Medical Center Psychologists, Department of Psychiatric Medicine, UVA, 1998-1999
Environment of Care Review Committee, Department of Student Health, UVA, 1998-1999
Summer Orientation Planning Committee, Division of Student Affairs, UVA, 1998-1999
Child Psychiatry Training Committee, Department of Psychiatry and Behavioral Neuroscience, The University of Chicago, 2000-present
Coordinator, Child Psychology Training, Department of Psychiatry and Behavioral Neuroscience, The University of Chicago, 2000-present
Supervisor/Lecturer, Medical Student and Psychiatry Residency Training, Child and Adolescent Psychiatry Rotations, Pritzker School of Medicine, The University of Chicago, 1999-present
Disability Documentation Reviewer, Office of the Dean of Students, The University of Chicago, 2000-present
Department Infrastructure Committee, Department of Psychiatry and Behavioral Neuroscience, The University of Chicago, 2005-2006
Scientist Member, Institutional Review Board, The University of Chicago Medicine and Biological Sciences Division, 2005-present
Acting Vice-Chair, Committee B, 2012
Vice-Chair, Committee A, 2014-present
Acting Coordinator, Psychology, Pediatric Consultation-Liaison (CL) Service, Department of Psychiatry, The University of Chicago, 2005-2006
Co-chair, Pediatric CL Psychologist Faculty Search Committee, Department of Psychiatry, The University of Chicago, 2005-2006
Secondary Appointments in Psychiatry Ad-Hoc Committee, Department of Psychiatry, University of Chicago, 2006
Program Task Force (Clinical/Education; Child Psychiatry), Department of Psychiatry, University of Chicago, 2007
Chair, Pediatric Neuropsychology Faculty Search Committee, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago, 2008-2009; 2010-2011
Intake Task Force, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago, 2011
Co-chair, Clinical Psychology Faculty Search Committee, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago, 2012-2013
Faculty Member, University-Wide Disability Access Committee (UWAC), The University of Chicago, 2012-2016
Judge, Pritzker Medical School 67th Annual Senior Scientific Session, Scholarship and Discovery Track, The University of Chicago, 2013
Chair, Child Clinical Psychology Faculty Search Committee, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago, 2013-14
Member, Child Psychology Faculty Search Committee, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago, 2014
Departmental Committee on Appointments and Promotions, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago, 2014-present
Judge, Pritzker Medical School 68th Annual Senior Scientific Session, Scholarship and Discovery Track The University of Chicago, 2014
Co-Chair, Diversity Committee, Department of Psychiatry & Behavioral Neuroscience, University of

Chicago, 2014-2017
Chair, PhD Master Committee, Faculty Recruitment, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago, 2015-2017
Judge, Pritzker Medical School 69th Annual Senior Scientific Session, Scholarship and Discovery Track, The University of Chicago, 2015
Judge, Pritzker Medical School 70th Annual Senior Scientific Session, Scholarship and Discovery Track, The University of Chicago, 2016
Judge, Pritzker Medical School 71st Annual Senior Scientific Session, Scholarship and Discovery Track, The University of Chicago, 2017
Member, The University of Chicago Medicine and Biological Sciences Committee on Appointments and Promotions (COAP), 2016-2020
Member, Biological Sciences Division Faculty Diversity and Inclusion Advisory Board, The University of Chicago Medicine and Biological Sciences, 2017-present
Longitudinal Faculty Development and Retention Subcommittee, 2017-present
UCM/BSD Faculty Diversity and Inclusion Committee, 2018-present
Psychiatry and Behavioral Neuroscience Representative, Departmental Diversity and Inclusion Task Force, 2019-present
Judge, Pritzker Medical School Summer Research Scientific Session, Scholarship and Discovery Track, The University of Chicago, 2017
Co-Chair, The University of Chicago Trauma Center Registry Workgroup, 2018-2020
Reviewer, The University of Chicago Campus-Wide Inclusive Climate Request for Proposals, 2018
Judge, Pritzker Medical School 72nd Annual Senior Scientific Session, Scholarship and Discovery Track, The University of Chicago, 2018
Faculty, Warner-Reynolds Longitudinal Leadership Program, Office of Faculty Affairs, University of Chicago Medicine and Biological Sciences, 2018
Scientific Reviewer, The University of Chicago-Rush University Institute for Translational Medicine Research Grant Program, 2018; 2020
Co-Chair, Steering Committee, Trauma Interest Workgroup, Mansueto Institute for Urban Innovation and UChicago Medicine, University of Chicago, 2019-present
Supervisor/Lead Developer, Behavioral Health Services, The Village, Department of Medicine, Section of Infectious Diseases and Center for HIV Elimination, University of Chicago, 2019-present
Chair, Pediatric Neuropsychology Faculty Search Committee, Department of Psychiatry & Behavioral Neuroscience, University of Chicago, 2020
Chair, Equity, Diversity, and Inclusion Committee, Department of Psychiatry & Behavioral Neuroscience, University of Chicago, 2020-present.
Judge, Pritzker Medical School 75th Annual Senior Scientific Session, Scholarship and Discovery Track, The University of Chicago, 2021
Elected Member (Alternate), UChicago Medicine and Biological Sciences Faculty Advisory Committee, University of Chicago, 2021-2022

Professional and Scientific Organization Memberships:

American Academy of Clinical Neuropsychology (AACN; Affiliate Member)
American Epilepsy Society (AES)
American Psychological Association (APA)
Divisions 7 (Developmental Psychology); 12 (Society of Clinical Psychology); 33 (Intellectual and Developmental Disabilities/Autism Spectrum Disorder); 40 (Society of Clinical Neuropsychology); 44 (Society for the Psychology of Sexual Orientation and Gender Diversity); 45 (Society for the Psychological Study of Culture, Ethnicity, and Race); 53 (Society of Clinical Child Psychology); 54 (Society of Pediatric Psychology)
American Society of Bioethics and Humanities (ASBH)

Association of Psychological Science (APS)
Children's Oncology Group (COG): Behavioral Sciences Section
GLMA: Health Professionals Advancing LGBTQ Equality
Hispanic Neuropsychological Society (HNS)
International Neuropsychological Society (INS)
National Academy of Neuropsychology (NAN)
Sigma Xi
Society for a Science of Clinical Psychology (SSCP)

Supported Research:
Current and Continuing Research Studies:

2008-open *Children's Oncology Group Protocol ALTE07C1: Neuropsychological, social, emotional, and behavioral outcomes in children with cancer.* PI (Chair): L. Segovia, UT Health Sciences Center at San Antonio; Site-PI: T. Henderson, Section of Pediatric Hematology-Oncology, Department of Pediatrics, University of Chicago; Neuropsychology Consultant: S. Hunter (per-protocol support).

2013- 2021 *Early cognitive and behavior characteristics in Neurofibrobatosis, Type 1 (NF1).* Funded through NF-Midwest and University of Wisconsin, Milwaukee. PI: B. Klein-Tasman. Co-I: S. Hunter (per protocol support).

2013-2021 *Characterization of diabetes subtypes: Neonatal and Monogenic diabetes.* Funded through University of California, San Francisco: The Leona M. and Harry B. Helmsley Charitable Trust (PI: L. Philipson). Site PI: S. Greeley. Co-I: S. Hunter, (per protocol support).

2014-2022 *Development and validation of Patient Reported Outcomes (PRO) measures for individuals with Neurofibromatosis 1 (NF1) and Plexiform Neurofibromas (PNs).* Funded through Johns Hopkins University. PI : J. Tonsgard. Co-I : S. Hunter (per protocol support).

2017-2022 NIH 5UG 3OD023348-02: *ELGAN-3/ECHO: Environment, epigenetics, neurodevelopment of extremely premature children.* PI (Chair): M. O'Shea, University of North Carolina, Chapel Hill; Site-PI: M. Msall, Section of Developmental and Behavioral Pediatrics, Department of Pediatrics, University of Chicago. S. Hunter, Co-PI (0.10 FTE).

2018-2021 *Testing a Novel Biomarker of Illness Progression in Restrictive Eating Disorders.* Funded by University of Chicago Biological Sciences Division CTSA. PI: J. Wildes, Department of Psychiatry & Behavioral Neuroscience, University of Chicago. Co-I: S. Hunter.

2019-2022 *Hematopoietic Stem Cell Transplantation for Patients with Severe Sickle Cell Disease Using Myeloablative Conditioning and Alpha/Beta T-Cell Depleted Hematopoietic Stem Cells from Partially Matched Familial Donors.* PI: M. Nassin, Section of Pediatric Hematology/Oncology, Department of Pediatrics, University of Chicago. NIH and internally funded. Co-I: S. Hunter (per protocol support).

2020-2022 CFAR: *Patient Outcome Reporting for Timely Assessments of Life with HIV and Anxiety Disorders (PORTAL HIV-Anxiety).* PI's: N. Laiteerapong (Section of Primary Care), J. Ridgeway

(Section of Internal Medicine), Department of Medicine, University of Chicago. Co-I: S. Hunter (0.2 FTE).

2020-2022 Janssen 54135419TRD4005: *A Study of Esketamine Nasal Spray, Administered as Monotherapy, in Adult Participants with Treatment-resistant Depression*. Site PI: J. Grant, Department of Psychiatry & Behavioral Neuroscience, University of Chicago. Site MADRS Rater: S. Hunter (0.3 FTE).

Completed Research Grants and Studies:

1994-1996 *Temperament as a predictor of individual differences in infants' visual attention: An event-related potential analysis*. PI: S. Hunter (100% effort supported). Support through UIC Department of Psychology Dissertation Research Support Grant and APA/APF Henri Hecaen Scholarship for Graduate Research in Neuropsychology

1995 *Convergent and criterion validity of the NEPSY: Developmental Assessment of Neuropsychological Functions with the Benton Neuropsychological Battery.* PI: A.B. Sivan, with support for S. Hunter at 60% FTE. Contract grant from The Psychological Corporation, San Antonio, TX

1995 *Assessment of cognitive functioning during antidepressant treatment*. PIs: H. Kravitz, A.B. Sivan (S. Hunter - 15% FTE). Support: Rush Institute on Mental Well-Being, Rush-Presbyterian-St. Luke's Medical Center.

1996-1997 *Auditory attentional and sensory gating in Tourette syndrome and comorbid Attention Deficit Hyperactivity Disorder*. PI: S. Hunter (50% FTE); Co-PIs: J. Lou, D. Palumbo, P. Como. Support: MIND and Neuromuscular Disease Divisions, Department of Neurology, University of Rochester.

1998-1999 *Sensitivity and specificity of a screening battery for LD/ADHD in adults*. PI: S. Hunter (10% FTE); Co-PIs: J. Maedgen, J. Barth. Support: Division of Student Affairs and Department of Student Health, University of Virginia.

1999-2001 *Analysis of neurocognitive function in children with Systemic Lupus Erythematosus*. PIs: M. Klein-Gitelman, F. Zelko; Co-investigators: L. Wagner-Weiner, S. Hunter. Support: Lupus Foundation of America (No direct support for investigators).

2000-2005 *Cognitive and affective changes in response to Vagal nerve stimulation implantation in children with intractable epilepsy*. PI: K. Hecox; Co-PIs: S. Hunter, M. Kohrman, D. Frim. Support: The University of Chicago Brain Research Foundation and Section of Pediatric Neurology. Funding from Cyberonics (1% FTE).

2000-2004 *Neurological and behavioral changes in the pediatric epilepsies: Prediction of cognitive and behavioral change based on neuropsychological status.* PI: K. Hecox. Co-PIs: S. Hunter, M. Kohrman, D. Frim. Funded by Falk Medical Research Trust to the University of Chicago Children's Hospital's Pediatric Epilepsy Center (Falk Center for Advanced Study and Care of Pediatric Epilepsy). Support for S. Hunter (20% FTE).

2003-2006 *NIAID Pediatric AIDS Clinical Trials Group (P1025 Study): The University of Chicago Site Component.* Site coordinator: J. Marcinek, Department of Pediatrics;

Neuropsychology Consultant Investigator: S. Hunter (1% FTE).

2003-2007 NIH-NINCDS R01-NS41440-01: *Hydrocephalus intracranial pressure and neurocognition*. PI: D. Frim, Departments of Neurosurgery and Pediatrics; Co-investigators: M. Lacy, S. Hunter, R. Penn, et al. Support for S. Hunter at 15% FTE (2003); 12% FTE (2004-2005); 10% FTE (2006-2007).

2005-2007 *A multi-center, open-label long-term follow-up study of the safety and efficacy of Levetiracetam (Keppra) in children with partial onset seizures (Study N01148): The University of Chicago Site Component.* Site coordinator: M. Kohrman, Department of Pediatrics; Neuropsychology Consultant Investigator: S. Hunter, Department of Psychiatry (1% FTE). Supported through UCB-Pharma, Inc.

2005-2007 *A double-blind randomized multi-center placebo-controlled inpatient (34 day) study of Levetiracetam (Keppra) Oral Solution as adjunctive treatment of refractory partial onset Seizures in pediatric epileptic subjects between age 1 month and 4 years of age (Study N01009): The University of Chicago Site Component.* Site coordinator: M. Kohrman, Department of Pediatrics; Neuropsychology Consultant Investigator: S. Hunter, Department of Psychiatry (1% FTE). Supported through UCB-Pharma, Inc.

2005-2006 *Retrospective analysis of cognitive and behavioral impact on refractory pediatric epilepsy patients treated adjunctively with Levetiracetam (Keppra).* PI: S. Hunter, Department of Psychiatry; Co-investigator: M. Kohrman, Supported through UCB-Pharma, Inc (1% FTE).

2005-2006 *Neurofibromatosis Consortium Development Site Award: Psychosocial aspects of Neurofibromatosis during adolescence.* PI: J. Tonsgard, Department of Pediatrics, Section of Pediatric Neurology; Neuropsychology Consultant Investigator: S. Hunter, Department of Psychiatry (1% FTE). Supported through US Department of Defense.

2005-2010 *Neurological and behavioral change in the pediatric epilepsies:* PI: M. Kohrman. Funded by Falk Medical Research Trust to the University of Chicago Comer Children's Hospital Pediatric Epilepsy Center (Falk Center for Advanced Study and Care of Pediatric Epilepsy). Support for S. Hunter at 27% FTE through 2009; final support at 12% FTE.

2006-2010 *Pediatric HIV/AIDS Cohort Study (PHACS): Adolescent Master Protocol (AMP).* The University of Chicago Sub Contract Site PI: J. Marcinak, Department of Pediatrics. Primary Site: Children's Memorial Hospital PI: R. Yogev. Sponsored by National Institute of Child Health and Human Development (NICHD). Site Neuropsychology Consultant: S. Hunter (per-protocol support).

2007-2010 *Pediatric HIV/AIDS Cohort Study (PHACS): SMARTT (PH100) Protocol.* The University of Chicago Sub Contract Site PI: J. Marcinak, Pediatrics; Primary Site: Children's Memorial Hospital PI: R. Yogev. Sponsored by National Institute of Child Health and Human Development (NICHD). Site Neuropsychology Consultant: S. Hunter (per-protocol support).

2007-2012 *Children's Oncology Group Protocol ACNS0232: Radiotherapy alone vs. Chemotherapy followed by response-based radiotherapy for newly diagnosed primary*

CNS Germinoma: A phase-III group wide study. PI (Chair): J. Allen, New York University Medical Center; Site-PI: C. Rubin, Department of Pediatrics, Section on Hematology-Oncology, Department of Pediatrics. Site Neuropsychology Consultant: S. Hunter (per-protocol support).

2008-2014 *Neurofibromatosis Type 1 (NF1) Clinical Trials Consortium: Phase II Study: A prospective randomized placebo-controlled study of Lovastatin to improve neuro-cognitive outcome in children between 10 and 17 years of age with NF1 and learning disabilities.* Funded by USAMRMC Office of Congressionally Directed Medical Research Programs (CDMRP), Department of Defense. Vice Chair and Site PI: J. Tonsgard. Neuropsychology Consultant: S. Hunter (10% FTE

2010-2013 *Early signs of learning and attention vulnerability in Neurofibromatosis-1.* PI: B. Klein-Tasman, Child Neurodevelopment Research Laboratory, Department of Psychology, University of Wisconsin-Milwaukee. S. Hunter: Co-PI for University of Chicago subaward (2% FTE). Funded by NF Incorporated-Midwest.

2010-2013 *Learning and attention vulnerability in Neurofibromatosis-1.* PI: B. Klein-Tasman Child Neurodevelopment Research Laboratory, Department of Psychology, University of Wisconsin-Milwaukee. S. Hunter: Co-PI for The University of Chicago subaward (2% FTE). Funded by NF Incorporated-Mid-Atlantic.

2010-2013 CTSA UL1 RR024999: *Behavioral and cognitive characteristics of young children with NF-1.* Co-PI's: J. Tonsgard, Section of Pediatric Neurology, Department of Pediatrics, The University of Chicago, S.J. Hunter, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago, K. Kelley, Department of Pediatrics, NorthShore University Health System, & B. Klein-Tasman, Department of Psychology, University of Wisconsin-Milwaukee. Funded by The University of Chicago Institute for Translational Medicine Collaborative Studies Among NSUHS and The University of Chicago Research Award. (SJH Support: 2% FTE).

2010-2014 *Double-blind, randomized, historical control study of the safety and efficacy of Eslicarbazepine Acetate monotherapy in subjects with partial epilepsy not well controlled by current antiepileptic drugs (Protocol 093-045).* Funded by Sepracor, Inc./Sunovian, Inc. PI : M. Kohrman, Pediatric Neurology and Comer Pediatric Epilepsy Program, The University of Chicago; Co-investigator: S. Hunter (per-protocol support).

2010-2014 *A randomized, double-blind, placebo-controlled study of RAD001(Everolimus) in the treatment of patients with subependymal giant cell astrocytomas (SEGA) associated with Tuberous Sclerosis Complex (TSC).* Funded by Novartis. PI : M. Kohrman, Pediatric Neurology and Comer Pediatric Epilepsy Program, The University of Chicago; Co-investigator: S. Hunter (per-protocol support).

2010-2014 *Genotype/phenotype associations in neonatal diabetes: The interrelationship between beta cell function, neurodevelopment and sleep.* PI: S.A.W. Greeley, Section of Pediatric Endocrinology, & M. Msall, Section of Developmental & Behavioral Pediatrics, Department of Pediatrics, The University of Chicago. Funded by a University of Chicago Institute for Translational Medicine Clinical and Translational Human Studies Award. Consulting neuropsychologist: S. Hunter (per-protocol support).

2010-2015 *Pediatric HIV/AIDS Cohort Study (PHACS): Adolescent Master Protocol (AMP-2).* The University of Chicago Subcontract Site PI: K. Alexander, Department of Pediatrics, Section of Pediatric Infectious Disease. Primary Site: Children's Memorial Hospital PI: R. Yogev. Sponsored by National Institute of Child Health and Human Development (NICHD) and NIH. Site Neuropsychology Consultant: S. Hunter (per-protocol support).

2010-2015 *Pediatric HIV/AIDS Cohort Study (PHACS): SMARTT-2 (PH100) Protocol.* The University of Chicago Subcontract Site PI: K. Alexander, Department of Pediatrics; Section of Pediatric Infectious Disease; Primary Site: Children's Memorial Hospital PI: R. Yogev. Sponsored by National Institute of Child Health and Human Development (NICHD). Site Neuropsychology Consultant: S. Hunter (per-protocol support).

2011-2017 NIH-NINCDS 1 U01 NS 400069-01A2: *Neonatal biomarkers in extremely preterm babies predict childhood brain disorders (ELGAN-2).* PI: K. Kuban, Boston University Medical Center. Great Lakes Hub-Chicago PIs: S. Hunter, Department of Psychiatry & Behavioral Neuroscience, & M. Msall, Department of Pediatrics, The University of Chicago. (SJH Support: 6% FTE).

2012-2015 NIH-NIDDK K23 DK094866-03: *Incretin regulation of insulin secretion in human neonatal diabetes.* PI: S.A.W. Greeley, Department of Pediatrics, The University of Chicago Medicine and Biological Sciences. Co-investigator: S. Hunter, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago. (SJH Support: 0.1% FTE).

2012-2017 NIH-NHLBI R01 HL065270-09A1: *Cognitive function in snoring children.* PI: D. Gozal, Department of Pediatrics, The University of Chicago Medicine and Biological Sciences. Co- PI: S. Hunter, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago. (SJH Support: 5% FTE).

2013-2015 *Monogenic diabetes registry.* PI: S.A.W. Greeley, Section of Pediatric Endocrinology. Funded by the Max Goldenberg Foundation. Co-investigator: S. Hunter, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago. (SJH Support: 0.1% FTE).

2013-2017 PAR-12-068 Fogarty HIV Research Training Program for Low and Middle Income Country Institutions (D43): *Multidisciplinary NeuroAIDS research training to improve HIV outcomes in Nigeria.* PIs: B. Taiwo, Northwestern University, Chicago, IL and K. Robertson, University of North Carolina at Chapel Hill. S. Hunter role: Neuroscience Mentor/Educator (8% FTE).

2013-2017 *A three-arm, randomized, double-blind, placebo-controlled study of the efficacy and safety of two trough-ranges of everolimus as adjunctive therapy in patients with tuberous sclerosis complex (TSC) who have refractory partial-onset seizures.* Funded by Novartis. PI: M. Kohrman, Section of Pediatric Neurology, The University of Chicago. Site neuropsychology consultant: S. Hunter (per protocol support).

2013-2019 *Pediatric HIV/AIDS Cohort Study (PHACS-3) Adolescent Master Protocol (AMP) and Mitochondrial Determinants Component (MDC).* Funded through NIH (NICHD Lead; NIAAA; NIMH; NHLBI; NIAID; NIDA; NIDCD; and NINDS). PI: R. Van Dyke, Tulane University; Northwestern University Lurie Children's Hospital PI: K. Malee.

Site-PI: J. Rosebush. Neuropsychology consultant: S. Hunter (per protocol support).

2013-2019 *Pediatric HIV/AIDS Cohort Study (PHACS-3): Surveillance Monitoring for ART Toxicities Study in HIV-uninfected children born to HIV-infected mothers: SMARTT.* Funded through NIH (NICHD Lead; NIAAA; NIMH; NHLBI; NIAID; NIDA; NIDCD; and NINDS). PI: R. Van Dyke, Tulane University; Northwestern University Lurie Children's Hospital PI: K. Malee. Site-PI: J. Rosebush. Neuropsychology consultant: S. Hunter (per protocol support).

2014-2016 NIH-NIDDK R03 DK103096-01: *KCNJ11 Diabetes: Exploring the role of KATP channels in the brain.* PI: S.A.W. Greeley, Department of Pediatrics, University of Chicago Medicine and Biological Sciences. Co-investigator: S. Hunter, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago. (SJH Support: 0.1% FTE).

2014-2018 NIH-NICHD R01 HD074757: *Sedation strategy and cognitive outcome after critical illness in early childhood – RESTORE-cognition.* PIs: M.A.Q. Curley, University of Pennsylvania, Philadelphia, PA and R.S. Watson, Seattle Children's Hospital, University of Washington, Seattle, WA. Lead neuropsychologist: S. Beers, University of Pittsburgh, Pittsburgh, PA. Site PI: S. Hunter, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago (per-protocol support).

2015-2016 *Development and validation of patient reported outcomes (PRO) measures for individuals with Neurofibromatosis-1(NF1) and plexiform neurofibromas (PNs).* Site-PI: J. Tonsgard, Section of Pediatric Neurology, The University of Chicago Medicine. Co-site PI: S. Hunter, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago Medicine. (SJH Support: per-protocol support).

2017-2021 *Community violence exposure and neural systems underlying threat in children.* Funded by NARSAD: Brain and Behavioral Research Foundation. PI: K. Jacobson. Co-I: S. Hunter (per protocol support).

2018-2020 *A Phase III, Randomized, Double-Blind, Placebo-Controlled, Efficacy, and Safety Study of Balovaptan in Adults with Autism Spectrum Disorder with a 2-Year Open-Label Extension (V1ADUCT).* Funded by Roche. PI: J. Grant, Department of Psychiatry & Behavioral Neuroscience, University of Chicago. Site Rater: S. Hunter (per protocol-support).

Submitted and In-Revision Grants:

2020-2025 RFA-DA-18-002 NIDA/NIH: Advancing Exceptional Research on HIV/AIDS and Substance Abuse: *"Marijuana use, neurocognitive factors, and HIV prevention care in a high risk group."* PI's: Sarah Keedy, Department of Psychiatry & Behavioral Neuroscience, University of Chicago; John Schneider, Section of Infectious Diseases, Department of Medicine, University of Chicago. Co-PI: Scott Hunter (0.10 FTE). In revision for resubmission.

Internally Funded Projects and Doctoral Dissertations in Laboratory:

2003 *Identification and intervention of behavioral and cognitive concerns in conjunction With Gonadotropin-releasing hormone agonist treatment in a toddler with a constitutively activating mutation of the lutenizing hormone receptor: A clinical*

case trial. Co-PIs: R. Rosenfield, B. Leventhal, S. Hunter, B. Danis, et al. Departments of Pediatrics and Psychiatry, The University of Chicago. Unfunded project.

2005 *Characterization of attentional disorders in children born prematurely with neonatal complications.* PI: S. Hunter. Co-PIs: S. Hirsch, M. Msall. Departments of Psychiatry and Pediatrics, The University of Chicago.

2005 *Neuropsychological profile differences between persons with Aspergers syndrome and nonverbal learning disability.* Dissertation PI: C. Dumitrescu (Roosevelt U.) under Co-PI: S. Hunter. Defended 5/2006.

2006-2007 *Manifestations of Post-Traumatic Stress Disorder (PTSD) in Children and Adolescents with High-Functioning Autism and Asperger Disorder.* PI: A. Rubinstein (Honors Thesis), The University of Chicago. Co-PI: Jessica Dong (IMSA Research Mentee). Directing PI: S. Hunter. Departments of Psychology and Psychiatry, The University of Chicago.

2006-2008 *Cognitive and behavioral functioning in children and adolescents with Opsoclonus-Myoclonus syndrome.* Collaborative research with K. Crews (IMSA Research Mentee), L. Noll (Texas Children's Hospital, Houston, TX), M. Pranzatelli & E. Tate (SIU School of Medicine, Springfield, IL), and C. Rubin (The University of Chicago).

2007-2008 *Validity and reliability of the BRIEF and BASC-2 in neurodevelopmentally disordered children.* Collaborative research with B. Klein-Tasman (U. Wisconsin, Milwaukee).

2007-2008 *Does neuropsychological profiling predict differences in functioning between nonverbal learning disorder and high functioning autism?* Collaborative research with B. Klein-Tasman (U. Wisconsin, Milwaukee).

2007-2009 *Behavioral impact of ongoing seizure control with second-generation anti-epilepsy drugs (AEDs).* Collaborative research with L. Bennett-Blackburn (St. Louis Children's Hospital/Medical College of Wisconsin) and J. Titus (St. Louis Children's Hospital).

2007-present *Verbal memory in epilepsy: Mapping and modeling damaged networks.* PI: V. Leo Towle. Co-investigator neuropsychologist: S. Hunter.

2008-2010 *Sensitivity of an abbreviated neuropsychological battery in screening for Reading Disorder.* Dissertation PI: C. Kane (IIT) under co-PI: S. Hunter. Defended 3/2010.

2008 *Neuropsychological moderators of social skills in children with complex partial and primary generalized epilepsy.* Dissertation PI: T. Farmer (Roosevelt U.) under co-PI: S. Hunter. Defended 6/2008.

2009 *The relationship among epilepsy type, seizure frequency and medication status and its impact on executive, cognitive and achievement functioning in pediatric patients with epilepsy.* Dissertation PI: L. Felix (IIT) under co-PI: S. Hunter. Defended 5/2009.

2010 *Effects of psychosis on cognitive functioning in adolescents.* PI: N. Karnik, Child & Adolescent Psychiatry, Department of Psychiatry & Behavioral Neuroscience, University of

Chicago; Trainee coordinator: M. Junaid. Co-PI: S.J. Hunter.

2010 *Interdisciplinary training to address health disparities affecting minority youth and transitioning adults.* HRSA Graduate Psychology Education Programs Grant. US Department of Health and Human Services. PI: S. Hunter (15% FTE). Clinical Psychology Training Program, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago. Scored and ranked, but unfunded.

2010 *Identification of vulnerability for learning problems in young children with NF-1.* DoD Neurofibromatosis Investigator Initiated Research Award. USAMRAA W81XWH-10-NFRP-IIRA. PI: B. Klein-Tasman, University of Wisconsin-Milwaukee; Co-PI: S. Hunter (University of Chicago Subaward, 2% FTE). Scored and ranked, but unfunded.

2010-2013 *Thirty-million words project: Intervention to increase parental verbalizations to toddlers.* PI: Dana Suskind, M.D., Department of Surgery: Otolaryngology, Comer Children's Hospital, The University of Chicago; Psychometric consultant: S. Hunter. Funded by The University of Chicago CTSA. (No direct funding support).

2010 *Relationship of executive function patterns and academic achievement across DSM-IV-TR subtypes of Attention Deficit Hyperactivity Disorder (ADHD).* Dissertation PI: C. Young (IIT), under co-PI: S.J. Hunter. Defended 7/2012.

2011-2017 *Neurocognitive and psychiatric functioning of homeless youth in Chicago.* PI: S.J. Hunter. Privately funded, with additional support through the Department of Psychiatry and Behavioral Neuroscience, The University of Chicago.

2011 *Executive functioning in children with Autism, ADHD, and comorbid Autism and ADHD.* Dissertation PI: M. DiQuattro (Roosevelt), under co-PI: S.J. Hunter. Defended 7/2013.

2011 *HIV risk EF assessment and intervention for homeless youth.* PI: S.J. Hunter. Co-I: N. Karnik, CHeSS and Department of Psychiatry & Behavioral Neuroscience, University of Chicago. R21 Submission to NIH-NIDA, not scored, not funded.

2011 *Comparison of neuropsychological profiles of children with ADHD, Reading Disorder, and comorbid ADHD and Reading Disorder.* Dissertation PI: C. Hinkle (IIT), under co-PI: S. Hunter. Defended 8/2013.

2012 *Effects of cell phones on homeless youth social networks.* PI: N. Karnik, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago. Co-PI: S. Hunter. R01 Submission to NIH-NIMH, Summer 2012; scored and ranked, but not funded.

2012 *Pain, trauma, and quality of life among newly diagnosed pediatric cancer patients and their primary caregivers.* Dissertation PI: M. Goldstein (UIC), under co-PIs: N. Karnik, T. Drossos, K. Afzal, and S. Hunter, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago. Proposed 3/2012; Defense 9/2013.

2012-2017 *Pain, trauma, and quality of life among newly diagnosed pediatric cancer patients and their primary caregivers.* PI: K. Afzal, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago. Co-investigators: S. Hunter, T. Drossos.

2012 *Gotta eat to live, gotta steal to eat: Investigation of effortful control, negative affect, and antisocial behavior in homeless youth.* Dissertation PI: K. Kaszynski (IIT), under co-PI: S. Hunter. Proposed 5/2012; Defense 7/2014.

2013-2019 *Specificity of deficits in executive functioning in youth with nonverbal learning disability, attention deficit hyperactivity disorder, and reading disorder.* Dissertation PI: Kimberly McCue (IIT), under co-PI: S. Hunter. Proposed 10/2013. Defense 3/2019.

2013 *Reporter congruence regarding executive functioning in ethnic minority youth and its relationship with objective measure performance.* Dissertation PI: Silvia Henriquez (DePaul U.), under co-PI: S. Hunter. Proposed 10/2013. Defense 6/2015.

2014 *Traumatic brain injury in homeless youth: How attachment and a history of reported head injury relate to psychopathology and executive dysfunction.* Dissertation PI: Kathleen Ares (Chicago School of Professional Psychology), under co-PI: S. Hunter. Proposed 6/2014; Defense 11/2014.

2015-present *Marijuana effects and executive function pilot study among young black men who have sex with men.* PI: J.A. Schneider, Section of Infectious Disease, Department of Medicine, The University of Chicago Medicine and Biological Sciences. Co-investigators: S. Hunter, S. Keedy, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago.

2015 *Risky sexual behaviors in homeless youth: The influence of executive functioning, depression, and length of homelessness on the condom use of homeless youth in Chicago.* Dissertation PI: Nicholas Hartley (Roosevelt U.), under co-PI: S. Hunter. Proposed 10/2015; Defense 2/2017.

2016 *The effect of musical activity on depression and anxiety among pediatric patients*. The University of Chicago Comer Children's Hospital PI: A. Tothy. Masters in Music Therapy PI coordinator: H. Limper, The University of Chicago Center for Healthcare Delivery Science and Innovation. Co-investigator/Psychology Consultant: S. Hunter, Department of Psychiatry & Behavioral Neuroscience, The University of Chicago.

2016-2018 *Language, negative affect, and aggression in children with Autism Spectrum Disorder.* Dissertation PI: T. Dreher (Illinois Institute of Technology), under PI: M. Scott. Co-I: S. Hunter. Proposed 10/2016. Defended 2018.

2017-present *Decreasing Distress in Inpatient Pediatric Hematopoietic Stem Cell Transplantation Patients: A Brief Cognitive Behavioral Intervention.* PI: Tina Drossos, Section of Child & Adolescent Psychiatry, Department of Psychiatry & Behavioral Neuroscience. Co-PI: S. Hunter.

2018-2019 *Executive functioning as an index of agency in young black men who have sex with men: Using EF within a vulnerability analysis of sexual and behavioral decision making in at-risk adolescents and emerging adults.* PI: S. Hunter. Project as part of fellowship requirements, The MacLean Center for Clinical Medical Ethics, The University of Chicago.

2019-present *The neuropsychological profile of children exposed to chronic community violence and*

related trauma. PI: S. Hunter. Co-I: S. Dinizulu, L. Bush. REACT Program. Section of Child & Adolescent Psychiatry, Department of Psychiatry & Behavioral Neuroscience.

Publications:

Articles in Peer-Refereed Journals:

1. Foster, L.G., **Hunter, S.J.**, Bilgrave, D., & Anthony, B.J. (2000). ADHD and the nature of self-control. *Clinical Psychology Review, 20*, 140-141.

2. Sanchez, L.M., Chronis, A.M., & **Hunter, S.J.** (2006). Improving compliance with diabetes management in young adolescents with Attention Deficit Hyperactivity Disorder using behavior therapy. *Cognitive and Behavioral Practice, 13*, 134-145.

3. Lacy, M., Pyykkonen, B.A., **Hunter, S.J.**, Do, T., Oliveira, M., Austria, E., Mottlow, D., Larson, E., & Frim, D. (2008). Intellectual functioning in children with early-shunted post-hemorrhagic hydrocephalus. *Pediatric Neurosurgery, 44*, 376-381.

4. Levisohn, P., Mintz, M., **Hunter, S.J.**, Yang, H., Jones, J., & the N01103 Levetiracetam Study Group (2009). A randomized, double-blind, placebo-controlled, non-inferiority trial to evaluate the neurocognitive effects of adjunctive levetiracetam in children with partial onset epilepsy. *Epilepsia, 50*, 2377-2389.

5. De la Loge, C., **Hunter, S.J.**, Schiemann, J. & Yang, H. (2010). Assessment of behavioral and emotional functioning using standardized instruments in children and adolescents with partial-onset seizures treated with adjunctive levetiracetam in a randomized, placebo-controlled trial. *Epilepsy and Behavior, 18*, 291-298.

6. Pina-Garza, J.E., Schiemann-Delgardo, J., Yang, H., Duncan, B., Hadac, J., & **Hunter, S.J.** (2010). Adjunctive levetiracetam in patients aged 1 month to <4 months with partial onset seizures: An open-label long-term follow-up study. *Clinical Therapeutics, 32*, 1935-1950.

7. Edidin, J.P., Ganim, Z., **Hunter, S.J.**, & Karnik, N. (2012). The mental and physical health of homeless youth: A literature review. *Child Psychiatry and Human Development, 3*, 354-375. DOI: 10.1007/s10578-011-0270-1

8. Quimby, E.G., Edidin, J.P., Ganim, Z., Gustafson, E., **Hunter, S.J.**, & Karnik, N.S. (2012). Psychiatric disorders and substance use in homeless youth: A comparison of San Francisco and Chicago. *Behavioral Sciences, 2*, 186-194. DOI:10.3390/bs2030186

9. Miller, T.I., Borkowsky, W., DiMeglio, L.A., Dooley, L., Geffner, M.E., Hazra, R., McFarland, E.J., Mendez, A.J., Patel, K., Siberry, G.K., Van Dyke, R.B., Worrell, C.J., Jacobson, D.L. and the Pediatric HIV/AIDS Cohort Study (PHACS): Shearer, W., Cooper, N., Harris, L., Purswani, M., Baig, M., Cintron, A., Puga, A., Navarro, S., Patton, D., Burchett, S., Karthas, N., Kammerer, B., Yogev, R., Malee, K., **Hunter, S.**, Cagwin, E., Wiznia, A., Burey, M., Nozyce, M., Chen, J., Gobs, E., Grant, M., Knapp, K., Allison, K., Garvie, P., Acevedo-Flores, M., Rios, H., Olivera, V., Silio, M., Borne, C., Sirois, P., Spector, S., Norris, K., Nichols, S., McFarland, E., Barr, E., Chambers, C., Watson, D., Messenger, N., Belanger, R., Dieudonne, A., Bettica, L., Adubato, S., Scott, G., Himic, L., & Willen, E. (2012). Metabolic abnormalities and viral replication are associated with biomarkers of vascular dysfunction in HIV-infected children. *HIV Medicine, 13*, 264-75. DOI: 10.1111/j.1468-1293.2011.00970.x

10. Kaszynski, K.L., Kallis, D.L., Karnik, N.S., Soller, M.V., **Hunter, S.J.**, Haapanen, R., Blair, J., & Steiner, H. (2013). Incarcerated youth with personality disorders: Prevalence, comorbidity, and convergent validity. *Personality and Mental Health, 8,* 42-51. DOI:10.1002/pmh.1241

11. Klein-Tasman, B.P., Janke, K.M, Luo, W., Casnar, C., **Hunter, S.J.**, Tonsgard, J., Trapane, P., van der Fluit, F., & Kais, L.A. (2013). Cognitive and behavioral phenotype of young children with Neurofibromatosis-1. *Journal of the International Neuropsychological Society, 20*, 1-11. DOI: 10.1017/S1355617713001227.

12. Afzal, K.I., Drossos, T., & **Hunter, S.J.** (2014). Mood and behavior disorders in pediatric epilepsy. [Special issue: General health for children with epilepsy, C. Macmillan, Ed.] *Journal of Pediatric Epilepsy, 2*, 157-172. DOI 10.3233/PEP-13057.

13. Lauer, A., Gustafson, E., Ford, A.E., Edidin, J.P., Smith, D.L., **Hunter, S.J.**, & Karnik, N.S. (2014). Psychiatric disorders, high-risk behaviors, and chronicity of episodes among predominantly African-American homeless Chicago youth. *Journal of Health Care for the Poor and Underserved, 25,* 1201-1216. DOI: 10.1353/hpu.2014.0124.

14. Nozyce, M., Huo, Y., Williams, P., Kapetanovic, S., Hazra, R., Nichols, S., **Hunter, S.**, Smith, R., Seage, G., & Sirois, P.A. for the Pediatric HIV/AIDS Cohort Study (2014). The association between maternal ARV exposure and cognitive and academic development in HIV-exposed but uninfected 5-12-year-old children. *Pediatric Infectious Disease Journal, 33,* 1128-1133. DOI: 10.1097/INF.0000000000000410.

15. Lerner, M.D., Potthoff, L.M., & **Hunter, S.J.** (2015). Optimizing prediction of social functioning in youth referred for neuropsychological testing. *PLoS One,* 10(5): e0128303. DOI: 10.1371/journal.pone.0128303.

16. Nichols, S., Brummel, S.S., Smith, R.A., Garvie, P.A., **Hunter, S.J.**, Malee, K.M., Kammerer, B.L., Wilkins, M.L., Rutstein, R., Tassiopoulos, K., Chernoff, M.C., & Mellins, C.A. for the Pediatric HIV/AIDS Cohort Study (2015). Executive functioning in children and adolescents with perinatal HIV infection. *Pediatric Infectious Disease Journal, 34*, 969-975. DOI: 10.1097/INF.0000000000000809

16. Adejumo, O.A., Malee, K.M., Ryscavage, P., **Hunter, S.J.**, & Taiwo, Babafemi O. (2015). Contemporary issues on the epidemiology and antiretroviral adherence of HIV-infected adolescents in sub-Saharan Africa. *Journal of the International AIDS Society, 18*, 20049. DOI: 10.7448/IAS.18.1.20049.

17. Carmody, D., Pastore, A.N., Landmeier, K.A., Letourneau, L.R., Martin, R., Hwang, J.L., Scott, M., **Hunter, S.J.**, Msall, M., Philipson, L.H., Naylor, R.N., & Grecley, S.A.W. (2016). Neuropsychological testing in a large group of subjects with neonatal diabetes due to KCNJ11 channel mutations identifies specific impairments. *Diabetic Medicine, 33,* 1380-1386. DOI: 10.1111/dme.13159

18. **Hunter, S.J.**, Gozal, D., Smith, D.L., Philby, M.F., Kaylegian, J., & Kheirandish-Gozal, L. (2016). Effect of sleep-disordered breathing severity on cognitive functioning performance measures in a large community cohort of young school-aged children. *American Journal of Respiratory and Critical Care Medicine, 194,* 739-747. DOI: 10.1164/rccm.201510-2099OC.

19. Smith, D.L., Gozal, D., **Hunter, S.J.**, Philby, M.L., Kaylegian, J., & Kheirandish-Gozal, L. (2016).

The impact of sleep-disordered breathing severity on behavior in a large cohort of community-residing early elementary school-aged children. *European Respiratory Journal, 48,* 1631-1639. DOI: 10.1183/13993003.00808-2016

20. Payne, J.M., Barton, B., Ullrich, N., Cantor, A., Hearps, S.J.C., Cutter, G., Rosser, T., Walsh, K.S., Gioia, G., Wolters, P., Tonsgard, J., Schorry, E., Viskochil, D., Kleese, L., Fisher, M., Gutmann, D.H., Silva, A.J., **Hunter, S.J.**, Rey-Casserly, C., Cantor, N.L., Byars, A.W., Stavinoha, P.L., Ackerson, J.D., Armstrong, C.L., Isenberg, J., O'Neil, S.H., Packer, R.J., Korf, B., Acosta, M.T., & North, K.N. for the NF Clinical Trials Consortium. (2016). A double-blind randomised placebo-controlled study of Lovastatin for cognitive deficits in children with neurofibromatosis type-1. *Neurology, 87,* 2575-2584. DOI: 10.1212/WNL.0000000000003435

21. **Hunter, S.J.** & Scott, M.N. (2017). Forward: Introduction to the special section: Neuropsychological evaluation in children with epilepsy. *Journal of Pediatric Epilepsy, 6,* 1-2. DOI: 10.1055/s-0036-1584917

22. Afzal, K., Anam, S. & **Hunter, S.J.** (2017). The effects of antiepileptic drugs on pediatric cognition, mood, and behavior. *Journal of Pediatric Epilepsy, 6,* 3-18. DOI: 10.1055/s-0036-1584935

23. Smith, D.L., Gozal, D., **Hunter, S.J.**, & Kheirandish-Gozal, L. (2017). Mixed multivariate analyses of cognitive and behavioral functioning in children with sleep disordered breathing. *Sleep Medicine.* DOI: 10.1016/j.sleep.2017.02.028

24. Goldschmidt, A.B., O'Brien, S., Lavender, J.M., Pearson, C.M., Le Grange, D., & **Hunter, S.J.** (2017). Executive functioning in racially diverse children who are overweight and at risk for eating disorders. *Appetite.* PMID: 28323058. DOI: 10.1016/j.appet.2017.03.010

25. Leviton, A., **Hunter, S.J.**, Scott, M.N., Hooper, S.R., Joseph, R.M., O'Shea, T.M., Allred, E.N., & Kuban, K. (2017). Observer variability identifying attention deficit/hyperactivity disorder in 10-year-old children born extremely preterm. *Acta Paediatrica, 106,* 1317-1322. DOI: 10.1111/apa.13869

26. Scott, M.N., **Hunter, S.J.**, Joseph, R.M., O'Shea, T.M., Hooper, S.R., Allred, E.N., Leviton, A., & Kuban, K. (2017). Neurocognitive correlates of ADHD in children born at extremely low gestational age. *Journal of Developmental and Behavioral Pediatrics.* DOI: 10.1097/DBP.0000000000000436

27. Leviton, A., Allred, E.N., Joseph, R.M., Scott, M., **Hunter, S.J.**, Hooper, S., O'Shea, M., Kuban, K., Fichorova, R.N., & Dammann, O. (2017). Systemic inflammation during the first postnatal month and the risk of attention deficit hyperactivity disorder symptoms among 10-year-old children born extremely preterm. *Journal of Neuroimmune Pharmacology, 12,* 531-543. DOI: 10.1007/s11481-017-9742-9

28. van der Burg, J., O'Shea, M., van de Bor, M., Kuban, K., Allred, E., Dammann, O., Leviton, A., Joseph, R., Scott, M., **Hunter, S.J.**, Jensen, E., & Hooper, S. (2017). Maternal obesity and attention-related symptoms in the preterm offspring. *Early Human Development, 115,* 9-15. DOI: 10.1016/j.earlhumdev.2-17.08.002

29. Smith, D.L., Gozal, D., **Hunter, S.J.**, & Kheirandish-Gozal, L. (2017). Behavior problems mediate the relationship between sleep disordered breathing and cognitive deficits in school-aged children. *Frontiers of Neurology – Sleep and Chronobiology Section, 8,* 410. DOI: 10.3389/fneur.2017.00410

30. Leviton, A., Hooper, S.R., **Hunter, S.J.**, Scott, M.N., Ware, J., Allred, E.N., Joseph, R.M., O'Shea, T.M., & Kuban, K. (2017). Antecedents of screening positive for attention deficit hyperactivity disorder in 10-year old children born very premature. *Pediatric Neurology.* DOI: 10.1016/j.pediatrneurol.2017.12010

31. Piche, J., Kaylegian, J., Smith, D., & **Hunter, S.J.** (2018). An analysis of the relationship between executive functioning and risk-taking behavior in homeless youth. *Behavioral Sciences, 8,* 6. DOI: 10.3390/bs8010006

32. Clauss-Ehlers, C.C., Chiriboga, D., **Hunter, S.J.**, Roysircar-Sadowsky, G., & Tummala-Narra, P. (2019). APA Multicultural Guidelines Executive Summary: Ecological approach to context, identity, and intersectionality. *American Psychologist, 74,* 232-244. DOI: 10.1037/amp0000382

33. Zheng, W., Minama Reddy, G.K., Dai, F., Chandramani, A., Brang, D., **Hunter, S.J.**, Kohrman, M.H., Rose, S., Rossi, M., Tao, J., Wu, S., Byrne, R., Frim, D.M., Warnke, P., & Towle, V.L. (2020). Chasing language through the brain: Successive parallel networks. *Clinical Neurophysiology.* DOI: 10.1016/j.clinph.2020.10.007

34. Garagozzo, A. & **Hunter, S.J.**, (2021). Cognition in sleep disordered breathing – Yes? No? Maybe? *Pediatric Pulmonology.* DOI: 10.1002/ppul.25420

35. **Hunter, S.J.** (2021). Considering mental health and neurodevelopmental outcomes for children born extremely prematurely. *Developmental Medicine & Clinical Neurology.* DOI: 10.1111/dmcn.14922

Submitted manuscripts and chapters under peer-review or revision:

Nayar, K., **Hunter, S.J.**, & Scott, M.N. (under revision). Sex differences in autism spectrum disorders: A multidisciplinary review. *Journal of Child Psychology and Psychiatry.*

Published Peer-Reviewed Professional Guidelines:

Task Force on Re-envisioning of the Multicultural Guidelines for the American Psychological Association (Clauss-Ehlers, C.C., Chirboga, D., **Hunter, S.J.**, Tummala-Narra, P., & Roysircar Sodowsky, G.). (2017). *Multicultural guidelines: An ecological approach to context, identity, and intersectionality.* http://www.apa.org/about/policy/multicultural-guidelines.aspx

Reviews in Peer-Reviewed Journals:

1. **Hunter, S.J.** (2003). [Review of Molfese & Molfese, *Developmental variations in learning.*] *Child Neuropsychology, 9,* 76-78. DOI: 10.1076/chin.9.1.76.14495

2. **Hunter, S.J.** (2007). A "how-to guide" for understanding persons with Asperger Disorder for a "neurotypical" world. [Review of Attwood, *The complete guide to Asperger's Syndrome.*] *PsycCritiques-Contemporary Psychology, 52(49).*

3. **Hunter, S.J.** (2008). Bringing the diagnosis, intervention, and programmatic support of intellectual and developmental disabilities into the 21st century [Review of Jacobson, et al., *Handbook of intellectual and developmental disabilities.*] *PsycCritiques-Contemporary Psychology, 53(22).*

4. **Hunter, S.J.** (2009). [Review of Woods, et al., *Treating Tourette Syndrome and Tic Disorders.*] *Child Neuropsychology, 15,* 99-102. Weblink: http://dx.doi.org/10.1080/09297040802112572.

5. **Hunter, S.J.** (2009). Integrated thinking about Autism Spectrum Disorders [Review of McGregor, et al., *Autism: An integrated view from neurocognitive, clinical, and intervention research.*]

PsycCritiques-Contemporary Psychology, 54(12). Weblink: http://psycnet.apa.org/critiques/54/12/6.html

6. **Hunter, S.J.** (2010). From neurons to individuals: Understanding neurodevelopmental disorders from a gene-person-environment context [Review of M. Shevell, *Neurodevelopmental disabilities: Clinical and scientific foundations.*] *PsycCritiques-Contemporary Psychology, 55(23).*

7. **Hunter, S.J.** (2011). The integral role of interoceptive, autonomic neurophysiology in self-regulation and social development [Review of S.W. Porges, *The polyvagal theory: Neurophysiological foundations of emotions, attachment, communication, self-regulation.*] *PsycCritiques-Contemporary Psychology, 56(44).*

8. **Hunter, S.J.** (2011). A library all on its own [Review of A.S. Davis, *Handbook of pediatric neuropsychology.*] *Journal of the International Neuropsychological Society, 17,* 1163-1165. DOI:10.1017/S1355617711001329

9. **Hunter, S.J.** (2015). Efficaciously addressing the lifespan in autism spectrum disorder [Review of F.R. Volkmar, B. Reichow, & J.C. McPartland, *Adolescents and adults with autism spectrum disorder.*] *PsycCritiques-Contemporary Psychology, 60(8).* Weblink: http://dx.doi.org/10.1037/a0038728

10. **Hunter, S.J.** (2016). Understanding creativity and its necessity through a neuroscience of artistic expression and engagement [Review of J.P. Huston, M. Nadal, F. Mora, L.F. Agnati, & C.J. Cela-Conde, *Art, aesthetics, and the brain.*] *PsycCritiques-Contemporary Psychology, 61(34).* Weblink: http://dx.doi.org/10.1037/a0040490

11. **Hunter, S.J.** (2017). Updating our understanding of how perceptual development fosters an infant's capacity to learn and know [Review of M.E. Arterberry & P.J. Kellman, *Development of perception in infancy: The cradle of knowledge revisited.*] *PsycCritiques-Contemporary Psychology, 62(9).* Weblink: http://dx.doi.org/10.1037/a0040739

12. **Hunter, S.J.** (2017). How seeing and representation are parsed across disciplines [Review of E.R. Kandel, *Reductionism in art and brain science: Bridging the two cultures.*] *PsycCritiques-Contemporary Psychology, 62(49).* Weblink: http://dx.doi.org/10.1037/a0041101

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24. **Hunter, S.J.**, Palumbo, D., & Manning, C. (1999, November). Neuropsychological manifestations of subcortically-based pediatric developmental disorders. Special Topics Workshop presented at the 19th Annual National Academy of Neuropsychology Conference, San Antonio, TX.

25. Klein-Gitelman, M., Wagner-Weiner, L., Kress, A., Zelko, F., & **Hunter, S.** (2001, November). Comparison of neurocognitive function in children with juvenile systemic lupus erythematosus without overt neurologic disease to their peers: A case control evaluation. Presentation to the 65th Annual Scientific Meeting of the American College of Rheumatology, San Francisco, CA.

26. Klein-Tasman, B., **Hunter, S.**, Grieve, A., Fuchs, C., & Noll, L. (2002, April). Relationships between the BASC and BRIEF and cognitive functioning in a clinic-referred sample. Presentation to the Great Lakes Regional Meeting on Child Health Psychology, Society of Pediatric Psychology, Milwaukee, WI.

27. Klein-Tasman, B. & **Hunter, S.** (2002, May). Comparing behavior with cognition: Do the BASC and BRIEF assist with diagnostic clarification in pediatric neuropsychological evaluations? Presentation to the Annual Meeting of the Midwest Neuropsychology Group, Chicago, IL.

28. Klein-Gitelman, M., Zelko, F., Kress, A., **Hunter, S.** & Wagner-Weiner, L. (2002, October). Comparison of neuropsychological function in children with Systemic Lupus Erythematosus (pSLE) and their peers – A second year follow-up. Presentation to the 67th Annual Scientific Meeting of the American College of Rheumatology, New Orleans, LA.

29. Sanchez, L.M., Chronis, A.M., & **Hunter, S.** (2004, November). Improving compliance with diabetes management in children with Attention Deficit Hyperactivity Disorder. Presentation to the American Association of Behavior Therapy, New Orleans, LA.

30. Do, T., Lacy, M., **Hunter, S.**, Mottlow, D., Karsza, K., & Frim, D. (2005, February). Long-term neurocognitive impact of nonsiphoning shunt placement. Presentation to the 33rd Annual Meeting of the International Neuropsychological Society, St. Louis, MO.

31. Frim, D., Lacy, M., Do, T., **Hunter, S.**, Karsza, K., & Mottlow, D. (2005, October). Neurocognitive performance after shunting for hydrocephalus: Effects of shunt valve type. Presentation to the Congress of Neurological Surgeons Annual Meeting, Boston, MA.

32. **Hunter, S.J.** (2005, October). Working memory as an executive function: Implications for education. Presentation to the 19th Annual meeting of the International Dyslexia Association (Illinois Chapter), Oak Brook, IL.

33. **Hunter, S.J.**, Rubinstein, A., Kohrman, M., Hecox, K., & Grieve, A. (2006, February). Neuropsychological change associated with levetiracetam (Keppra) when treating children with epilepsy. Presentation at the 34th Annual Meeting of the International Neuropsychological Society, Boston, MA.

34. Dumitrescu, C.C. & **Hunter, S.J.** (2006, February). Neuropsychological profile differences between Aspergers Syndrome and Nonverbal Learning Disorder: Implications for diagnostic divergence. Presentation at the 34th Annual Meeting of the International Neuropsychological Society, Boston, MA.

35. **Hunter, S.J.**, Malzer, V., Noll, L. & Pranzatelli, M. (2006, June). Characterizing neurocognitive and behavioral functioning in pediatric Opsoclonus-Myoclonus Syndrome (OMS). Presentation at the 10th International Child Neurology Congress, Montreal, Quebec, Canada.

36. **Hunter, S.J.**, Dumitrescu, C., & Kane, C. (2006, June). Neuropsychological profile differences support diagnostic divergence between Aspergers Syndrome and Nonverbal Learning Disorder. Presentation at the 10th International Child Neurology Congress, Montreal, Quebec, Canada.

37. **Hunter, S.J.**, Rubinstein, A., Hecox, K., Kohrman, M. & Grieve, A. (2006, June). Neuropsychological change associated with the addition of Levetiracetam (Keppra) when treating pediatric epilepsy. Presentation at the 10th International Child Neurology Congress, Montreal, Quebec, Canada.

38. Pyykkonen, B.A., **Hunter, S.J.**, Do, T., Lacy, M., Frim, D. & Mottlow, D. (2006, June). Neurocognitive correlates of group membership: A comparison of hydrocephalus patients shunted within the first year of life and normal controls. Presentation at the 10th International Child Neurology Congress, Montreal, Quebec, Canada.

39. Lacy, M., Pyykkonen, B., Mottlow, D., Do, T., **Hunter, S.**, & Frim, D. (2006, October). Shunting vs.

ETV: Long-term cognitive outcome. Presentation to the Congress of Neurological Surgeons Annual Meeting, Chicago, IL.

40. Pyykkonen, B.A., Do, T., **Hunter, S.J.**, Larson, E.R., Lacy, M., Oliveira, M.D., Mottlow, D., & Frim, D. (2007, February). Intellectual functioning in children treated for hydrocephalus with nonsiphoning shunts. Presentation to the 35th Annual Meeting of the International Neuropsychological Society, Portland, OR.

41. Pyykkonen, B.A., Oliveira, M.D., **Hunter, S.J.**, Larson, E.R., Lacy, M., Mottlow, D., & Frim, D. (2007, February). Interaction between intellectual and academic functioning in congenital hydrocephalus. Presentation to the 35th Annual Meeting of the International Neuropsychological Society, Portland, OR.

42. Pyykkonen, B.A., Larson, E.R., **Hunter, S.J.**, Oliveira, M.D., Lacy, M., Mottlow, D., & Frim, D. (2007, February). Cognitive performance in congenital hydrocephalus. Presentation to the 35th Annual Meeting of the International Neuropsychological Society, Portland, OR.

43. Oliveira, M.D., Pyykkonen, B.A., Lacy, M., Larson, E.R., **Hunter, S.J.**, Mottlow, D., & Frim, D. (2007, February). Cognitive outcome as a function of endoscopic third ventriculo-cisternostomy in hydrocephalus. Presentation to the 35th Annual Meeting of the International Neuropsychological Society, Portland, OR.

44. Austria, E., Pyykkonen, B.A., **Hunter, S.J.**, Lacy, M., Oliveira, M., Mottlow, D., & Frim, D. (2007, May). Interaction between intellectual and academic functioning in congenital hydrocephalus. Presentation to the Midwest Psychological Association Annual Meeting, Chicago, IL.

45. Lacy, M., **Hunter, S.**, Oliveira, M., Pyykkonen, B., Mottlow, D., & Frim, D. (2007, September). IQ and scholastic achievement in children with hydrocephalus: Are there strategies of remediation? Presentation to the Congress of Neurological Surgeons Annual Meeting, Pediatric Neurosurgical Forum, San Diego, CA.

46. Mintz, M., **Hunter, S.**, Yang, H., Schiemann, J., Jones, J., & Stalvey, T. (2007, December). A randomized, double-blind, multicenter, placebo-controlled safety study to evaluate the cognitive and neuropsychological effects of levetiracetam 20-60 mg/kg/day as adjunctive treatment in pediatric patients with partial onset seizures. Presentation to the 61st Annual Meeting of the American Epilepsy Society, Philadelphia, PA.

47. Austria, E., Lacy, M., **Hunter, S.**, Frim, D., Kasza, K., & Lee. C. (2008, February). Executive functioning in children with shunted hydrocephalus. Presentation at the 36th Annual Meeting of the International Neuropsychological Society, Kona, Hawaii.

48. Lacy, M., Austria, E., Lee, C., Frim, D., **Hunter, S.**, Oliveira, M., & Kasza, K. (2008, April). Parent assessment on the BRIEF correlates with executive performance of children with shunted hydrocephalus. Presentation to the 2008 American Association of Neurological Surgeons Annual Meeting, Chicago, IL.

49. De la Loge, C., **Hunter, S.**, Schiemann, J., Yang, H., & LEV N01103 Pediatric Study Group (2008, April). Adjunctive levetiracetam for partial onset seizures: Assessment of behavioral and emotional function in children and adolescents in a randomized placebo-controlled study. Presentation to the 60th Annual Meeting of the American Academy of Neurology, Chicago, IL.

50. Levisohn, P., **Hunter, S.**, Yang, H., Schiemann, J., Jones, J., Stalvey, T. & the N01103 Levetiracetam Study Group (2008, August). Neurocognitive effects of adjunctive levetiracetam in children with partial-onset seizures: A randomised, double-blind, placebo-controlled, non-inferiority study. Presentation to the 12th Congress of the European Federation of Neurological Societies, Madrid, Spain.

51. Drane, D., Finton, M., Salinsky, M., Schoenberg, M., & **Hunter, S.** (2008, October). Clinical trials in epilepsy: Past, present, and future practice. Symposium presentation to the 28th Annual National Academy of Neuropsychology Conference, New York, NY.

52. De la Loge, C., Yang, H., Schiemann, J., & **Hunter, S.** (2008, November). Can the CHQ-PF50 be used to monitor changes in behavioral and emotional functioning in children treated for epilepsy? Presentation to the 11th Annual European Congress of the International Society of Pharmacoeconomics and Outcomes Research (ISPOR), Athens, Greece.

53. Sinsioco, C., Kohrman, M., **Hunter, S.**, Malzer, V., & Casnar, C. (2008, December). Neurocognitive outcomes of pediatric patients after epilepsy surgery. Presentation to the 62nd Annual Meeting of the American Epilepsy Society, Seattle, WA.

54. Farmer, T. & **Hunter, S.J.** (2009, February). Neuropsychological moderators of social skills in children with complex partial and primary generalized epilepsy. Presentation to the 37th Annual Meeting of the International Neuropsychological Society, Atlanta, GA.

55. Felix, L. & **Hunter, S.J.** (2009, February). The relative contribution of executive functioning to the relationship between cognitive and academic functioning in children with epilepsy. Presentation to the 37th Annual Meeting of the International Neuropsychological Society, Atlanta, GA.

56. Pina-Garza, J.E., Schiemann, J., Yang, H., Duncan, B., Hadac, J., **Hunter, S.J.**, & the NO1148 Levetiracetam Study Group (2009, June). Adjunctive levetiracetam in children aged 1-month to <4-years with partial-onset seizures: A long-term, multicenter, non-comparative, open-label follow-up study. Presentation to the 28th International Epilepsy Congress, Budapest, Hungary.

57. Felix, L., Helder, E., Drossos, T., Tonsgard, J., & **Hunter, S.J.** (2010, February). NF-2: A case study of complex neurobehavioral disability. Presentation to the 38th Annual Meeting of the International Neuropsychological Society, Acapulco, Mexico.

58. Thome, J., **Hunter, S.J.**, Drossos, T., & Casnar, C. (2010, February). Open-lip schizencephaly: Neurobehavioral presentation of an 8-year-old boy. Presentation to the 38th Annual Meeting of the International Neuropsychological Society, Acapulco, Mexico.

59. **Hunter, S.J.**, Casnar, C., Sinsioco, C., Ogden, P. & Kohrman, M. (2010, February). Neurocognitive and behavioral outcomes of pediatric epilepsy surgery. Presentation to the 38th Annual Meeting of the International Neuropsychological Society, Acapulco, Mexico.

60. Casnar, C., **Hunter, S.J.**, & Felix, L. (2010, February). Utility of the BASC-2 and BRIEF in discriminating Autism Spectrum Disorder (ASD), Attention Deficit Hyperactivity Disorder (ADHD), and comorbid ASD/ADHD. Presentation to the 38th Annual Meeting of the International Neuropsychological Society, Acapulco, Mexico.

61. Casnar, C., DiQuattro, M., Young, C., Hyman, L., & **Hunter, S.J.** (2011, February). Verbal learning, memory, and discriminability in children with ADHD, Autism, and co-occurring ADHD and Autism. Presentation to the 39th Annual Meeting of the International Neuropsychological Society, Boston, MA.

62. **Hunter, S.J.** (2011, May). Neurocognitive and psychiatric functioning of homeless youth in Chicago. Invited presentation to the Annual Meeting of the Midwest Neuropsychology Group, Chicago, IL.

63. Karnik, N.S. (Chair), Steiner, H., Huemer, J., Vostanis, P., Edidin, J., & **Hunter, S.J.** (2011, May). Current research and interventions for underserved and vulnerable youth. Symposium at the 164th Annual Meeting of the American Psychiatric Association, Honolulu, HI.

64. Sirois, P., Nozyce, M.L., Huo, Y., Malee, K., Smith, R., Garvie, P.A., **Hunter, S.J.**, Nichols, S.L., Van Dyke, R., Williams, P.L., et al. for the Pediatric HIV/AIDS Cohort Study (2011, May). Infant development and safety of ARV use during pregnancy and the neonatal period. Presentation to Annual Meeting of the Association of Psychological Science, Washington, DC.

65. Lupo, A., Albert, E.J., Zheng, W., Malinauskaite, E., Smith A., Valle, M., Weissler, A., Jimenez, T., **Hunter, S.**, Li, L., Barbanel, D.L., James, B., Yuan, P.J., Sharma, S., Frim, D.M., Kohrman, M.H., Tao, J.X., & Towle, V.L. (2011, May). Two types of ECoG activity induced by verbal memory tasks. Presentation to the 4th International Conference on Epilepsy Research, Center for Integrative Neuroscience and Neuroengineering Research, The University of Chicago, Chicago, IL.

66. Meyerson, D.A., Schuh, J.A., & **Hunter, S.J.** (2011, June). Contributions of general cognitive skill and executive functioning to social problem-solving in a clinical sample of youth with and without ADHD. Presentation to the Ninth Annual Conference of the American Academy of Clinical Neuropsychology, Washington, DC.

67. Klein-Tasman, B.P., Kais, L., Trapane, P., **Hunter, S.J.**, Tonsgard, J.H., & Janke, K.M. (2011, June). Attention and inhibition in young children with Neurofibromatosis-Type 1: A multimethod study. Presentation to the Annual Neurofibromatosis Conference, Jackson Hole, WY.

68. Klein-Tasman, B.P., Berka, S., Kais, L.A., Trapane, P., Tonsgard, J.H., **Hunter, S.J.**, & Janke, K. (2011, June). Social skills in young children with Neurofibromatosis-Type 1: Relations to intellectual function and attention problems. Presentation to the Annual Neurofibromatosis Conference, Jackson Hole, WY.

69. Lupo, A., Albert, E.J., Zheng, W., Malinauskaite, E., Yuan, P.J., Frim, D.M., Kohrman, M.H., Tao, J.X., **Hunter, S.**, & Towle, V.L. (2011, September). Two types of ECoG activity induced by verbal memory tasks. Presentation to the International Society of Interoperative Neurophysiology Meetings, Barcelona, Spain.

70. Quimby, E.G., Edidin, J.P., Ganim, Z., **Hunter, S.J.** & Karnik, N.S. (2011, October). Psychiatric disorders and substance abuse in homeless youth: A comparison of San Francisco and Chicago. Presentation to the Annual Meeting of the American Academy of Child and Adolescent Psychiatry, Toronto, Ontario, Canada.

71. Young, C., DiQuattro, M., & **Hunter, S.J.** (2012, February). Maternal reports of executive functioning skills in children with ADHD, ASD, and comorbid presentations. Submitted for

presentation to the 40th Annual Meeting of the International Neuropsychological Society, Montreal, Quebec, Canada.

72. Edidin, J., Gustafson, E., Karnik, N., & **Hunter, S.J.** (2012, February). Neurocognitive functioning in homeless youth. Presentation to the 40th Annual Meeting of the International Neuropsychological Society, Montreal, Quebec, Canada.

73. Kaszynski, K., Hinkle, C., Edidin, J., Karnik, N., & **Hunter, S.J.** (2012, February). Executive dysfunction and social-emotional adjustment in homeless youth. Presentation to the 40th Annual Meeting of the International Neuropsychological Society, Montreal, Quebec, Canada.

74. Kais, L.A., Berka, S.M., Klein-Tasman, B.P., **Hunter, S.J.**, Tonsgard, J.H., & Haberman, D.A. (2012, February). Interrelations among social skills, attention problems, and intellectual functioning in young children with Neurofibromatosis-1. Presentation to the 40th Annual Meeting of the International Neuropsychological Society, Montreal, Quebec, Canada.

75. Janke, K.M., Klein-Tasman, B.P., **Hunter, S.J.**, Tonsgard, J.H., & Schutt, M.J. (2012, February). Relations between cognitive functioning and early academic skills in preschool-aged children with Neurofibromatosis-Type 1. Presentation to the 40th Annual Meeting of the International Neuropsychological Society, Montreal, Quebec, Canada.

76. Gustafson, E., Edidin, J., Karnik, N.S., & **Hunter, S.J.** (2012, March). Risk behavior in homeless youth: Relationship with self-reported and objectively measured executive functioning. Presentation to the Chicago Area Undergraduate Research Symposium, Chicago, IL.

77. D'Aniello, M., Edidin, J., Karnik, N.S., & **Hunter, S.J.** (2012, May). The relationship between executive functioning and risk behavior in homeless youth. Presentation to the Annual Meeting of the Association for Psychological Science, Chicago, IL.

78. Hinkle, C., Kaszynski, K., Edidin, J., Karnik, N.S., & **Hunter, S.J.** (2012, May). Memory and learning in homeless youth. Presentation to the Annual Meeting of the Association for Psychological Science, Chicago, IL.

79. Edidin, J., **Hunter, S.J.**, Karnik, N., Rice, E., & Milburn, N. (2012, August). Risk and resilience in homeless adolescents: Interdisciplinary strategies for research and intervention. Interdisciplinary Science Symposium at the 102nd Annual Meeting of the American Psychological Association, Orlando, FL. (Chairs: S.J. Hunter & N. Milburn).

80. Kaszynski, K., Hinkle, C., Edidin, J., Karnik, N.S., & **Hunter, S.J.** (2012, August). Self-restraint and executive functioning in homeless youth. Presentation to the 102nd Annual Meeting of the American Psychological Association, Orlando, FL.

81. Committee on Professional Practice and Standards (Harris-Britt, A., Wong, J., **Hunter, S.J.**, & Condie, L.O.) (2012, August). Updates and applications of practice guidelines in practice and graduate education. Symposium presented to the 102nd Annual Meeting of the American Psychological Association, Orlando, FL.

82. Lauer, A., Ford, A.E., Edidin, J., **Hunter, S.J.**, & Karnik, N.S. (2012, October). Psychiatric disorders, substance abuse, and chronicity of homelessness in youth in Chicago. Presentation to the 59th Annual Meeting of the American Academy of Child and Adolescent Psychiatry, San Francisco,

CA.

83. Ford, A.E., Lauer, A., Edidin, J., **Hunter, S.J.**, & Karnik, N.S. (2012, October). The impact of family factors and substance use on African-American youth homelessness. Presentation to the 59th Annual Meeting of the American Academy of Child and Adolescent Psychiatry, San Francisco, CA.

84. Reddy, G.K.M, Jones, R.E., Jimenez, T., Marystella, T., Zheng, W., Sha, C., Albert, E.J., Woodhouse, C., Campbell, A.N., **Hunter, S.J.**, Frim, D.M., Kohrman, M.H., Tao, J.X., & Towle, V.L. (2012, October). Te3, or not Te3, that is the question: Modality specific receptive language areas? Presentation to the Annual Meeting of the American Society for Neurophysiological Monitoring, Chicago, IL.

85. Fogel, M. & **Hunter, S.J.** (2012, November). APA Professional Practice Guidelines: Tools to explore, learn, and implement. Symposium presented at the Annual Meeting of the Illinois Psychological Association, Schaumberg, IL.

86. Jacola, L.M., Washington, K., Gustafson, E., Kohrman, M., & **Hunter, S.J.** (2013, February). Executive function and behavior patterns before and after surgical intervention in children with epilepsy. Presentation to the 41st Annual Meeting of the International Neuropsychological Society, Waikoloa, HI.

87. Kaszynski, K.L., Karnik, N.S., & **Hunter, S.J.** (2013, February). Executive functioning, self-restraint, and distress in homeless youth. Presentation to the 41st Annual Meeting of the International Neuropsychological Society, Waikoloa, HI.

88. Hinkle, C. & **Hunter, S.J.** (2013, February). Comparison of neuropsychological profiles of children with attention-deficit/hyperactivity disorder (ADHD), reading disorder (RD), and comorbid ADHD and RD. Presentation to the 41st Annual Meeting of the International Neuropsychological Society, Waikoloa, HI.

89. Nozyce, M., Huo, Y., Williams, P., Kapetanovic, S., Hazra, R., Nichols, S., **Hunter, S.**, Rich, K., Seage, P. & Sirois, P. (2013, March). Safety of in-utero and neonatal ARV exposure: Effects on cognitive and academic outcomes in HIV-exposed, uninfected children age 5-13 years. Presentation to the 20th Conference on Retroviruses and Opportunistic Infections (CROI), Atlanta, GA.

90. Legato, L.J., Goldwin, M.S., & **Hunter, S.J.** (2013, April). Late effects of pediatric cancer treatment and ADHD: Comparison of neuropsychological profiles. Presentation to the National Conference on Pediatric Psychology, New Orleans, LA.

91. Sobotka, S., Acharya, K., Vanderploeg-Booth, K., Smith, P., Rolland, C., **Hunter, S.J.**, & Msall, M. (2013, April). Developing a life course clinical and translational research network for individuals with Trisomy 21. Symposium at the Cognition in Down Syndrome: Molecular, Cellular, and Behavioral Features and the Promise of Pharmacotherapeutics Meeting, Vienna, VA.

92. Henriquez, S. & **Hunter, S.J.** (2013, June). Reporter congruence regarding executive functioning in youth and its relationship with objective measure performance. Presentation to the 11th Annual American Academy of Clinical Neuropsychology Conference, Chicago, IL.

93. Gustafson, E., Smith, D., Rice, E., Karnik, N., & **Hunter, S.J.** (2013, June). Episodes of homelessness and development of executive functioning in at-risk youth. Presentation to the 11th

Annual American Academy of Clinical Neuropsychology Conference, Chicago, IL.

94. Committee on Professional Practice and Standards (Harris-Britt, A., Wong, J., **Hunter, S.J.**, & Brancu, M.) (2013, August). Do professional practice guidelines truly matter? Issues and strategies in guidelines development, education, and dissemination. Symposium presented to the 103rd Annual Meeting of the American Psychological Association, Honolulu, HI.

95. **Hunter, S.J.** (2013, August). Case study: Revision to the Guidelines for Multicultural Education, Training and Professional Practice. Symposium presentation to the 103rd Annual Meeting of the American Psychological Association, Honolulu, HI.

96. Goldberg, S.R., Karnik, N.S., & **Hunter, S.J.** (2013, October). Resource utilization, social media, and social support in a population of homeless emerging adults. Presentation to the 60th Annual Meeting of the American Academy of Child and Adolescent Psychiatry, Orlando, FL.

97. Lerner, M. & **Hunter, S.J.** (2013, November). Optimizing prediction of social functioning in youth referred for neuropsychological testing. Presentation to the 47th Annual Convention of the Association for Behavioral and Cognitive Therapies, Philadelphia, PA.

98. Henriquez, S., Gustafson, E., & **Hunter, S.J.** (2014, February). Executive functioning in ethnic minority youth and reporter congruence in relationship with objective measure performances. Presentation to the 42nd Annual Meeting of the International Neuropsychological Society, Seattle, WA.

99. Hinkle, C.D. & **Hunter, S.J.** (2014, February). Comparison of neuropsychological profiles in children with Attention Deficit Hyperactivity Disorder, Reading Disorder, and comorbid ADHD and RD. Presentation to the 42nd Annual Meeting of the International Neuropsychological Society, Seattle, WA.

100. Ares, K., Gustafson, E., Kaszynski, K., Karnik, N. & **Hunter, S.J.** (2014, February). Executive functioning, memory performance, and risk taking behaviors in homeless youth. Presentation to the 42nd Annual Meeting of the International Neuropsychological Society, Seattle, WA.

101. Kaszynski, K.L., Karnik, N., & **Hunter, S.J.** (2014, February). Executive functioning, temperament, and antisocial personality disorder in homeless youth. Presentation to the 42nd Annual Meeting of the International Neuropsychological Society, Seattle, WA.

102. Gustafson, E., Karnik, N.S., & **Hunter, S.J.** (2014, February). A targeted executive functioning intervention model for vulnerable youth. Presentation to the 42nd Annual Meeting of the International Neuropsychological Society, Seattle, WA.

103. Casnar, C., Schuett, M., Janke, K., **Hunter, S.**, & Klein-Tasman, B. (2014, February). Parent perspectives on executive functioning in preschoolers with NF1: Comparison to typically developing controls and teacher ratings. Presentation to the 42nd Annual Meeting of the International Neuropsychological Society, Seattle, WA.

104. Brei, N., Casnar, C., Van der Fluit, F., Mambwe, C., Waldron, S., **Hunter, S.**, & Klein-Tasman, B. (2014, February). Relations of language functioning to attention, functional communication, and social skills in young children with NF1. Presentation to the 42nd Annual Meeting of the International Neuropsychological Society, Seattle, WA.

105. Carmody, D., Talluru, S., Pastore, A.N., **Hunter, S.J.**, Scott, M., Msall, M.E., & Greeley, S.A.W. (2014, May). *GATA6* related neonatal diabetes mellitus: Neurodevelopmental delay is not a consistent feature. Presentation submitted to the 2014 Joint Meeting of the Pediatric Academic Societies and the Asian Society for Pediatric Research, Vancouver, BC, Canada.

106. Minima-Reddy, G.K., Dai, Z., Zheng, W., Papa, H., Thimmapuram, R., **Hunter, S.J.**, Brang, D., Kohrman, M., Marcucilli, C.J., Tao, J., Frim, D., Rossi, M., Byrne, R., & Towle, V.L. (2014, May). Following speech through the brain: Three successive parallel networks. Presentation to the Annual Meeting of the American Society of Neurophysiological Monitoring, Chicago, IL.* (Prize awarded for best presentation at Conference)

107. Nichols, S.L., Brummel, S.S., Smith, R.A., Garvie, P.A., **Hunter, S.J.**, Malee, K.M., Kammerer, B.L., Wilkins, M.L., Mellins, C.A., & Chernoff, M.A., for the PHACS Study. (2014, June). Executive functioning in children and adolescents with perinatal HIV exposure and/or infection. Presentation to the 2014 Annual Meeting of the American Psychological Society, San Francisco, CA.

108. DiQuattro, M., Kvaal, S., Lu, L. & **Hunter, S.J.** (2014, June). Executive functioning in children with Autism, Attention-Deficit/Hyperactivity Disorder, and Comorbid Autism and Attention-Deficit/Hyperactivity Disorder. Presentation to the Annual Meeting of the American Academy of Clinical Neuropsychology, New York, NY.

109. Carmody, D., Scott, M., Pastore, A.N., Naylor, R.N., Hwang, J., Msall, M., **Hunter, S.J.**, Philipson, L.H., & Greeley, S.A.W. (2014, June). Comprehensive neuropsychological testing in a large group of subjects with neonatal diabetes: KATP channel mutations are consistently associated with specific impairment, while other gene causes are not. Presentation to the 16th International Congress of Endocrinology, Chicago, IL.

110. **Hunter, S.J.** (2014, August). Executive function and behavioral risk in homeless LGBTQ youth in Chicago and Los Angeles. Presentation as part of the Symposium: *LGBTQ youth and homelessness: Risks, resiliencies, intersections and interventions* at the 104th Annual Meeting of the American Psychological Association, Washington, DC.

111. Committee on Professional Practice and Standards (**Hunter, S.J.**, Deutsch, R., Wong, J., Corey, D. & Martinez, M.) (2014, August). Managing risk across the career life span: Know Your Guidelines. Symposium presented to the 104th Annual Meeting of the American Psychological Association, Washington, DC.

112. Towle, V.L., Minama-Reddy, G.K., Dai, Z., Zheng, W., Brang, D., **Hunter, S.J.**, Kohrman, M.G., Marcucilli, C.J., Tao, J.X., Rossi, M.A., Frim, D., & Byrne, R.W. (2014, October). Chasing language through the brain: Three successive parallel networks. Presentation to the Annual Meeting of the Society for the Neurobiology of Language, Amsterdam, NL.

113. Hock, L., Kaiser, E., Bunch, S., **Hunter, S.J.**, & Karnik, N.S. (2014, October). Correlates of substance abuse in Chicago homeless youth. Presentation to the 61st Annual Meeting of the American Academy of Child and Adolescent Psychiatry, San Diego, CA.

114. Ares, K., Hartley, N., & **Hunter, S.J.** (2015, February). The mediating role of traumatic brain injury on the relationship between temperament and psychopathology in

urban homeless youth. Presentation to the 43rd Annual Meeting of the International Neuropsychological Society, Denver, CO.

115. **Hunter, S.J.**, Gustafson, E., Kaylegian, J., Smith, D., & Karnik, N.S. (2015, February). Executive functioning, risk behaviors, and time homeless: The significance for LGBTQ homeless youth. Presentation to the 43rd Annual Meeting of the International Neuropsychological Society, Denver, CO.

116. Kaylegian, J., Ramoskaite, R., Gustafson, E., Smith, D., Karnik, N.J. & **Hunter, S.J.** (2015, February). Academic achievement and executive functioning is mediated by parental Involvement in homeless urban youth. Presentation to the 43rd Annual Meeting of the International Neuropsychological Society, Denver, CO.

117. Iampietro, M., Washington, K., Scott, M.N., & **Hunter, S.J.** (2015, February). Word memory test findings in a pediatric mixed clinical sample. Presentation to the 43rd Annual Meeting of the International Neuropsychological Society, Denver, CO.

118. **Hunter, S.J.**, Karnik, N.J., Smith, D., Gustafson, E., Kaylegian, J., Ramoskaite, R., & Edidin, J. (2015, March). An executive functioning and risk behavior model for understanding and supporting urban homeless youth. Presentation to the International Convention of Psychological Science, Amsterdam, NL.

119. Gross, I.M. & **Hunter, S.J.** (2015, March). The benefit of serial neuropsychological evaluation for academic achievement across a diverse clinical pediatric sample. Presentation to the International Convention of Psychological Science, Amsterdam, NL.

120. Goldschmidt, A. & **Hunter, S.J.** (2015, March). Executive function in overweight children with loss of control eating. Symposium paper presentation in K. Van Eck (Chair), *How inhibitory control deficits, food reward processing, and negative affect link to binge-eating and weight gain in youth*. Biennial Meeting of the Society for Research in Child Development, Philadelphia, PA.

121. Kaiser, E., Boley, R., Karnik, N., **Hunter, S.**, & Zalta, A.K. (2015, April). Predictors of current suicidality among homeless youth. Presentation to the Anxiety and Depression Association of America, Miami, FL.

122. Kaylegian, J., Piche, J., Ares, K., Kais, L., Smith, D.L., & **Hunter, S.J.** (2016, February). The relationship between level of executive functioning and engagement in high-risk behavior among urban homeless youth. Presentation to the 44th Annual Meeting of the International Neuropsychological Society, Boston, MA.

123. Shields, B. & **Hunter, S.J.** (2016, February). The relation between executive functioning and psychological disturbance in youth with pediatric generalized epilepsy. Presentation to the 44th Annual Meeting of the International Neuropsychological Society, Boston, MA.

124. Ares, K., Kaylegian, J., Kais, L., Smith, D.L., & **Hunter, S.J.** (2016, February). Homeless youths' self-reported executive functioning as mediated by traumatic brain injury severity. Presentation to the 44th Annual Meeting of the International Neuropsychological Society, Boston, MA.

125. Kheirandish-Gozal, L., Smith, D.L., **Hunter, S.J.**, Philby, M.F., Kaylegian, J., & Gozal, D. (2016,

May). Behavioral problems among young school-aged community children: Impact of sleep-disordered breathing. Presentation to the American Thoracic Society, San Francisco, CA.

126. Kheirandish-Gozal, L., **Hunter, S.J.**, Smith, D.L., Philby, M.F., Kaylegian, J., & Gozal, D. (2016, May). Sleep-disordered breathing severity and cognitive performance in community young school-aged children. Presentation to the American Thoracic Society, San Francisco, CA.

127. Gross, I., Kaylegian, J., Smith, D., Ramoskaite, R., & **Hunter, S.J.** (2016, June). Role of caregiver context and academic skill development in homeless youths. Presentation to the Annual Meeting of the American Academy of Clinical Neuropsychology, Chicago, IL.

128. Nayar, K., Goya Arce, A.B., Fields, E.F., Kaylegian, J., Scott, M.N. & **Hunter, S.J.** (2016, June). Substantial early malnutrition and the importance of neuropsychological evaluation: A case series examination of international adoption referrals. Presentation to the Annual Meeting of the American Academy of Clinical Neuropsychology, Chicago, IL.

129. Suffrin, R.L., Fields, E.F., Martin, R., Scott, M.N. & **Hunter, S.J.** (2016, June). Neuropsychological assessment of a pediatric patient with Myelodysplastic Sydrome and complicated treatment course. Presentation to the Annual Meeting of the American Academy of Clinical Neuropsychology, Chicago, IL.

130. Dreher, T., Martin, R., Plumb, N., Scott, M.N. & **Hunter, S.J.** (2016, June). ADHD and comorbid executive functioning and its effect on academic achievement. Presentation to the Annual Meeting of the American Academy of Clinical Neuropsychology, Chicago, IL.

131. Fields, E., Kaylegian, J., Scott, M.N., & **Hunter, S.J.** (2016, October). Neuropsychological assessment of a 10-year-old with a potential Velocardiofacial Syndrome Variant and history of Wilms' Tumor. Presentation to the 36th Annual Conference of the National Academy of Neuropsychology, Seattle, WA.

132. Piche, J., Kaylegian, J., Smith, D., & **Hunter, S.J.** (2016, October). An analysis of the relationship between executive functioning and risk-taking behavior in homeless youth. Presentation to the 63rd Annual Meeting of the American Association of Child and Adolescent Psychiatry, New York, NY.

133. Francis, N., Smith, D., Kaylegian, J., Schneider, J., & **Hunter, S.J.** (2017, February). EF, frequency of marijuana use, and HIV risk reduction in young black men who have sex with men (YBMSM). Presentation to the 45th Annual Meeting of the International Neuropsychological Society, New Orleans, LA.

134. Okuneye, V., Smith, A., Morgan, E., Keedy, S., **Hunter, S.J.**, & Schneider, J. (2017, February). Evidence of increased reward sensitivity in young black men who have sex with men (YBMSM) who are heavy cannabis users. Presentation to the 45th Annual Meeting of the International Neuropsychological Society, New Orleans, LA. (Symposium: Drug Abuse).

135. Weilnhammer, J., Fields, E., Summersett-Ringgold, F., Kaylegian, J., & **Hunter, S.J.** (2017, February). The relationship between executive behavioral control and emotional distress in urban homeless youth. Presentation to the 45th Annual Meeting of the International Neuropsychological Society, New Orleans, LA.

136. Smith, D., Schneider, J. & **Hunter, S.J.** (2017, February). Confirmatory factor analysis of the Behavior Rating Inventory of Executive Functioning (BRIEF) in young black men who have sex with men (YBMSM). Presentation to the 45th Annual Meeting of the International Neuropsychological

Society, New Orleans, LA.

137. Hartley, N., Ares, K., & **Hunter, S.J.** (2017, February). Risky sexual behaviors in homeless youth: The influence of executive functioning and depression on the condom use of homeless youth in Chicago and LA. Presentation to the 45th Annual Meeting of the International Neuropsychological Society, New Orleans, LA.

138. **Hunter, S.J.** (2017, June). How neuropsychology informs neuroimmunology – Understanding the cognitive and behavioral vulnerabilities in Autism Spectrum Disorders. Presentation for the *Symposium on inflammation, biomarkers, and intervention in neurodevelopmental disorders.* S.J. Hunter & L. Gomez, Chairs, CUBANNI 2017: Fourth International Workshop of Neuroimmunology and the First International Meeting of the Cuban Network of Neuroimmunology, Varadero, Cuba.

139. **Hunter, S.J.** (2017, June). How neuropsychology informs neuroimmunology: Considering Autism Spectrum Disorder. Presentation to the Second Latin American Course of Neuroimmunology, International Center for Neurological Restoration (CIREN), Havana, Cuba.

140. Adejumo, O.A., Malee, K., **Hunter, S.J.**, Oladokun, R.E., Brown, B., Omigbodun, O., Robertson, K., & Taiwo, B. (2017, July). Children and HIV in Nigeria: Prevalence, patterns and correlates of emotional and behavioral comorbidity. Presentation to the 9th International AIDS Society Conference on HIV Science, Paris, France.

141. **Hunter, S.J.** (2017, October). Neuropsychological assessment and monitoring of pre and post-surgical outcomes in pediatric epilepsy. Invited presentation to the 2017 CIP Neuro Forum: Course of new technology in pediatric neurology, Capital Institute of Pediatrics, Beijing, China.

142. Shapiro, J., Stiles-Shields, C., Yarboi, J., Afzal, K., **Hunter, S.J.**, Labelle, J., & Drossos, T. (2018, April). Decreasing pediatric distress during hematopoietic stem cell transplantation: Feasability and Efficacy of a CBT pilot study. Presentation to the Society for Pediatric Psychology Annual Conference, Orlando, FL.

143. Melchert, T.P. (Chair), **Hunter, S.J.**, & McGary, M. (2018, August). Social media in professional Psychology: Guidelines and critical issues. Symposium presentation to the 126th Annual Convention of the American Psychological Association, San Francisco, CA.

144. Clauss-Ehlers, C.C. (Chair), **Hunter, S.J.**, Tummala-Narra, P., Roysircar-Sodowsky, G., Chiriboga, D.A., & Warner, R.C. (2018, August). Multicultural Guidelines: An ecological approach to context, identity, and intersectionality. Symposium presentation to the 126th Annual Convention of the American Psychological Association, San Francisco, CA.

145. **Hunter, S.J.** (2018, October). A social neuroscience consideration of stigma: Neurophysiological and neurocognitive models. In Pumariega, A. & Radwan, K. (Chairs), *Outrunning stigma: How advancements in neuroscience and genetics inform our ability to reduce child mental health stigma.* Symposium at the 65th Annual Meeting of the American Academy of Child and Adolescent Psychiatry, Seattle, WA.

146. Katz, L., Garagozzo, A., Smith, D., **Hunter, S.J.**, Gozal, D., & Kheirandish-Gozal, L. (2019, February). Sleep-disordered breathing and parent-rated executive functioning in young children. Presentation to the 47th Annual Meeting of the International Neuropsychological Society, New York, NY.

147. Garagozzo, A., Katz, L., Smith, D., **Hunter, S.J.**, Gozal, D., & Kheirandish-Gozal, L. (2019, June). Language skill deficits in children with sleep-disordered breathing. Presentation to the 17th Annual Meeting of the American Academy of Clinical Neuropsychology, Chicago, IL.

148. Smith, D., **Hunter, S.**, Cox, J. & Dugan, K. (2019, November). Duration of homeless episodes and mental health in young adults: The role of executive functioning as a potential mediator. Presentation to the Annual Meeting of the American Public Health Association, Philadelphia, PA.

149. Garagozzo, A., Katz, L., Scott, M.N., & **Hunter, S.J.** (2019, November). Transdiagnostic factors of social impairment in comorbid Autism Spectrum Disorder and Attention Deficit Hyperactivity Disorder. Presentation to the 39th Annual Conference of the National Academy of Neuropsychology, San Diego, CA.

150. Winston, M. & **Hunter, S.J.** (2020, May). Executive functioning differences following epilepsy surgery in a pediatric cohort. Presentation to the 32nd Annual Convention of the Association for Psychological Science, Chicago, IL.

151. Garagozzo, A., Smith, D., & **Hunter, S.J.** (2020, October). Incongruence between self- and parent-report measures of executive function on the Behavior Rating Inventory of Executive Function (BRIEF) in adolescents with Attention Deficit Hyperactivity Disorder. Presentation to the 40th Annual Conference of the National Academy of Neuropsychology, Chicago, IL.

Professional Colloquia and Grand Rounds Presentations:

1. **Hunter, S.J.** (1990, December). Neurotoxic effects of childhood lead exposure. Clinical Neuropsychology Colloquium Series, Department of Psychiatry, The University of Chicago.

2. **Hunter, S.J.** (1991, April). A multimodal approach to treating personality disorders. Office of Applied Psychological Services Colloquium Series, Department of Psychology, University of Illinois at Chicago.

3. **Hunter, S.J.** (1991, December). A moment's notice: An ERP analysis of duration effects on infant memory and attention. Clinical Neurosciences Colloquium Series, Department of Psychiatry, The University of Chicago, Chicago, IL.

4. **Hunter, S.J.** (1993, September). The neuropsychology of attention. Clinical Neuropsychology Seminar Series, Department of Psychiatry, The University of Chicago, Chicago, IL.

5. **Hunter, S.J.** (1994, August). The neuropsychology of attention: Models, development, and disorders. Clinical Neuropsychology Seminar Series, Departments of Psychiatry and Neurology, The University of Chicago, Chicago, IL.

6. **Hunter, S.J.** (1996, November). An ERP analysis of infant temperament influences on early visual attention. Neuropsychology Research Conference, Department of Psychiatry, University of Rochester Medical Center, Rochester, NY.

7. **Hunter, S.J.** (1997, March). The neuropsychology of HIV and AIDS. Neuropsychology Research Conference, Department of Psychiatry, University of Rochester Medical Center, Rochester, NY.

8. **Hunter, S.J.** (1997, April). Traumatic brain injury in children. Neuropsychology Research

Conference, Department of Psychiatry, University of Rochester Medical Center, Rochester, NY.

9. **Hunter, S.J.** (1998, April). Update on the neuropsychology of HIV. Neuropsychology Colloquium, Department of Psychiatric Medicine, University of Virginia Medical Center, Charlottesville, VA.

10. **Hunter, S.J.** (1998, May). ADHD, TS, and the Developmental Basal Ganglia Syndrome. Neuropsychology Colloquium, Department of Psychiatric Medicine, University of Virginia Medical Center, Charlottesville, VA.

11. **Hunter, S.J.** (1998, November). What the ADA has to say to neuropsychologists: Documenting the need for academic and professional accommodations. Neuropsychology Colloquium, Department of Psychiatric Medicine, University of Virginia Medical Center, Charlottesville, VA.

12. **Hunter, S.J.** (1999, September). Does Lewy Body Dementia exist? A review of a conceptual diagnosis. Neuropsychology Colloquium, Department of Psychiatric Medicine, University of Virginia Medical Center, Charlottesville, VA.

13. **Hunter, S.J.** (1999, November). Subcortical disorders in children. Clinical Neurosciences Colloquium, Department of Psychiatry, The University of Chicago, Chicago, IL.

14. **Hunter, S.J.** (2000, June). Recognizing and treating Autism Spectrum Disorders. Pediatrics and Primary Care Symposium, Hope Children's Hospital at Christ Medical Center, Oak Lawn, IL.

15. Hecox, K., **Hunter, S.J.**, et al. (2000, October). The vision of discovery: Pediatric epilepsy treatment and research. Annual meeting of the Brain Research Foundation and the The University of Chicago, Chicago, IL.

16. **Hunter, S.J.** (2000, October). The neuropsychology of subcortically-based developmental disorders. Pediatric Grand Rounds, The University of Chicago Children's Hospital, Chicago, IL.

17. **Hunter, S.J.** (2000, November). Developmental basal ganglia syndrome: Model and implications. Clinical Neurosciences Series, Departments of Psychiatry and Neurology, The University of Chicago.

18. **Hunter, S.J.** (2001, March). Making sense of executive dysfunction. Child and Adolescent Psychiatry Grand Rounds, The University of Chicago.

19. **Hunter, S.J.** (2002, November). Traumatic brain injury. Pediatric Psychology Grand Rounds, LaRabida Children's Hospital and Research Center, Chicago, IL.

20. **Hunter, S.J.** (2006, February). Birth trauma and the development of attention and executive dysfunction: Sorting out the evidence. Department of Psychiatry Grand Rounds, The University of Chicago.

21. **Hunter, S.J.** (2006, October). Neurocognitive functioning in children with shunted early-onset hydrocephalus. Behavioral Neuroscience Day Conference, Department of Psychiatry, The University of Chicago.

22. Crews, K., **Hunter, S.**, & Malzer, V. (2008, April). An examination of treatment impact on cognitive functioning in children with Opsoclonus Myoclonus syndrome (OMS). Presentation to the

IMSAloquium: Illinois Math and Science Academy Research Mentorship Conference, Aurora, IL.

23. **Hunter, S.J.** (2009, July). Neuropsychological assessment: What, why, & how. Department of Pediatrics Grand Rounds, Pritzker School of Medicine, Biological Sciences Division, The University of Chicago.

24. **Hunter, S.J.** (2011, April). Mapping executive function development in pediatric conditions: Rationale, models, and implications. Department of Psychiatry and Behavioral Neuroscience Grand Rounds, Pritzker School of Medicine, Biological Sciences Division, The University of Chicago.

25. Bailey, J. & **Hunter, S.J.** (2011, April). Examining differences in cognitive and executive functioning scores in patients with Autism Spectrum Disorder, ADHD, and co-occurring Autism and ADHD. Presentation to the IMSAloquium: Illinois Math and Science Academy Research Mentorship Conference, Aurora, IL.

26. **Hunter, S.J.** (2011, November). Executive functioning in homeless youth: Understanding sexual and drug use risks. Presentation to Grant Lab Colloquium Series, Department of Psychology, DePaul University, Chicago, IL.

27. Zhang, K., Edidin, J., & **Hunter, S.J.** (2012, April). The effect of homelessness on executive functions in homeless youth. Presentation to the IMSAloquium: Illinois Math and Science Academy Research Mentorship Conference, Aurora, IL.

28. Lauer, A., Ford, A.E., Edidin, J., **Hunter, S.J.**, & Karnik, N.S. (2012, October). Psychiatric disorders, substance abuse, and chronicity of homelessness in youth in Chicago. The University of Chicago Pritzker School of Medicine Student Research Program Colloquium, Chicago, IL.

29. **Hunter, S.J.** (2012, November). The neuropsychological and psychiatric functioning of homeless youth in Chicago. Child Psychiatry Colloquium Series, Department of Psychiatry and Behavioral Neuroscience, The University of Chicago, Chicago, IL.

30. Goldberg, S.R., Karnik, N.S., & **Hunter, S.J.** (2013, August). Resource utilization, social media, and social support in a population of homeless emerging adults: Results of a qualitative study. The University of Chicago Pritzker School of Medicine Student Research Program Colloquium, Chicago, IL.

31. **Hunter, S.J.** (2014, September). From risk to resilience in homeless youth: Considering executive functions from within a risk intervention framework. Grand Rounds, Department of Behavioral Sciences, Rush University Medical Center, Chicago, IL.

32. **Hunter, S.J.** (2014, October). From risk to resilience in homeless youth: Considering the role of executive functions within an intervention framework. Grand Rounds, Department of Psychiatry, Stritch Medical School, Loyola University Chicago, Maywood, IL.

33. **Hunter, S.J.** (2014, December). Urban youth homelessness, executive functioning, and Psychopathology: Outlining a model of risk and resilience. Grand Rounds, Department of Psychiatry and Behavioral Neuroscience, The University of Chicago, Chicago, IL.

34. **Hunter, S.J.** (2017, February). Youth Homelessness and Neuropsychological Development: Understanding the Contribution of Contextual Factors to Lifespan Risk and Resilience. Grand

Rounds, Department of Psychiatry, Rush University Medical Center, Chicago, IL.

35. **Hunter, S.J.** (2017, March). Considering executive functioning when addressing risk and resilience in young black men who have sex with men (YBMSM) and homeless urban youth. Grand Rounds, UCLA Center for AIDS Research, David Geffen School of Medicine, University of California Los Angeles, Los Angeles, CA.

36. **Hunter, S.J.** (2019, May). Executive functioning as an index of agency in young black men who have sex with men (YBMSM): Using EF within a vulnerability analysis of sexual and behavioral decision making in at-risk adolescents and emerging adults. Presentation to the MacLean Center for Clinical Medical Ethics, The University of Chicago.

Invited Lectures, Workshops, and Talks:

1. **Hunter, S.J.** (1993, February). Event duration effects on infant attention and memory. Invited Lecture, Developmental Proseminar, Department of Psychology, University of Illinois at Chicago.

2. **Hunter, S.J.** (1993, April). Sexual disorders: Research and clinical practice considerations. Invited Lecture, Undergraduate Division (Abnormal Psychology), Department of Psychology, University of Illinois at Chicago.

3. **Hunter, S.J.** (1994, March). Developmental issues in the assessment of learning disabilities. Invited Lecture, Undergraduate Division (Developmental Psychology), Department of Psychology, University of Illinois at Chicago.

4. **Hunter, S.J.** (1994, April). Epistemological considerations in conducting developmental research. Invited Lecture, Developmental Proseminar, Department of Psychology, University of Illinois at Chicago.

5. **Hunter, S.J.** (1995, March). Your baby's first year: Cognitive and emotional development during the first year of life. Invited Lecture, Christopher House, Chicago Department of Mental Health, Chicago, IL.

6. Trenn, M.E., **Hunter, S.J.**, & Conner, B. (1995, September). Mental health issues in mental retardation and psychopathology. Invited Lecture, Jane Addams School of Social Work, UIC.

7. **Hunter, S.J.** (1997, January). Medication effects on cognitive functioning. Invited Lecture, School Psychology Department, Monroe #1 BOCES, Fairport, NY.

8. **Hunter, S.J.** (1997, March). Cognitive and emotional functioning in children with neurologic disorders. Invited Lecture, Mental Health Conference, Monroe #1 BOCES, Fairport, NY.

9. Cartwright, E., **Hunter, S.J.**, & Thomson, J.A. (1997, December). Medication and therapy treatments for ADHD: An integrative model. CHADD, Charlottesville, VA.

10. Cartwright, E. & **Hunter, S.J.** (1998, July). Attention Deficit Hyperactivity Disorder. "Talk Back About Health" Radio Program, WINA AM 1070, Charlottesville, VA.

11. **Hunter, S.J.** (1998, November/December). Neuropsychological assessment. First-year Clinical Psychology Psychological Assessment course, Department of Psychology, University of Virginia.

12. **Hunter, S.J.** (2000, March). Neurological disorders of childhood. Guest lecture to Community Family Services and Mental Health Center, Bloomingdale, IL.

13. **Hunter, S.J.** (2000, October). Attention deficit and its related disorders. Presented as part of a workshop, "The Fragile Brain," Jensen Learning Corporation, Glenview, IL.

14. **Hunter, S.J.** & Sivan, A.B. (2003, January). Making sense of executive dysfunction. Rush Day School, Section of Child Psychiatry, Rush Presbyterian St. Luke's Medical Center, Chicago, IL.

15. **Hunter, S.J.** (2003, March). Making sense of executive dysfunction: Further thoughts on assessment and diagnosis. Department of Psychiatry, University of Illinois at Chicago.

16. **Hunter, S.J.** (2003, October). Cognition and behavior in children with epilepsy: How neuropsychology fits in. Pediatric Neurology Update for Physicians, Section of Pediatric Neurology, The University of Chicago, Oak Brook Terrace, IL.

17. **Hunter, S.J.** (2005, April). Making sense of executive dysfunction. School of Psychology, Roosevelt University, Chicago, IL.

18. **Hunter, S.J.** (2005, November). Attention and executive dysfunction: Understanding the mechanisms of ADHD across the lifespan. Student Counseling and Resource Center, Faculty Rounds, The University of Chicago, Chicago, IL.

19. **Hunter, S.J.** (2006, October). The developmental neuropsychology of trauma and maltreatment. Invited address at the Illinois Counseling Association Annual Conference, Springfield, IL.

20. **Hunter, S.J.** (2007, June). Neuropsychological aspects of Neurofibromatosis Type I and their impact on treatment decision making. Pediatric Neuropsychology, Department of Child and Adolescent Psychiatry, Children's Memorial Hospital, Northwestern University Feinberg School of Medicine, Chicago, IL.

21. **Hunter, S.J.** (2008, June). Neurological disorders in childhood. Invited lecture at Pillars Community Mental Health Center, Bloomingdale, IL.

22. **Hunter, S.J.** (2009, October). Attention, executive function, and learning disabilities in NF-Type 1. Invited lecture to Neurofibromatosis (NF) Midwest Symposium, Hoffman Estates, IL.

23. **Hunter, S.J.** (2010, January). Neuropsychological aspects of pediatric HIV. Invited lecture as part of *Adoptions and healthy transitions: Medical, developmental, and psychological aspects of adoption of children with HIV/AIDS*. Presented by the University of Chicago Comer Children's Hospital International Adoption Clinic and Project Hopeful, Chicago, IL.

24. **Hunter, S.J.** (2010, September). Developing a screening battery for ADHD for a student mental health program. Invited lecture to the Student Counseling and Resource Center Fall Orientation, The University of Chicago, Chicago, IL.

25. **Hunter, S.J.** (2011, May). Neurocognitive and psychiatric functioning in homeless youth in Chicago. Invited lecture to the 2011 Midwest Neuropsychology Group Annual Meeting, Chicago, IL.

26. **Hunter, S.J.** (2011, November). Learning disorders in Neurofibromatosis, Type 1. Invited lecture for

Neurofibromatosis Type 1 and 2 for 2011 and beyond: Biology, diagnosis and treatment options, The Heinrich Kluver Memorial Lectureship, Department of Neurosurgery, The University of Chicago Medical Center, Chicago, IL.

27. **Hunter, S.J.**, Tonsgard, J., & Alanis, S. (2011, November). Neuropsychology and individualized education planning. Invited lecture to the Epilepsy Foundation of Greater Chicago 2011 Consumer Conference, Chicago, IL.

28. **Hunter, S.J.** (2013, April). Executive function and dysfunction: What parents need to know. Invited lecture to the University of Chicago Laboratory School Parent Association, Chicago, IL.

29. **Hunter, S.J.** (2013, April). Executive function and dysfunction: What educators need to know. Invited lecture to the faculty of the University of Chicago Laboratory School, Chicago, IL.

30. **Hunter, S.J.** (2013, May). The neuropsychology of processing disorders and dyslexia. Invited lecture to the 2013 Annual Educational Conference, Illinois Chapter, American Academy of Pediatrics, Downers Grove, IL.

31. **Hunter, S.J.** (2013, November). Executive function and dysfunction: Developmental mechanisms and associations with language and sensory learning. Invited workshop for the American Speech and Hearing Association (ASHA)-Illinois Annual Conference, Chicago, IL.

32. **Hunter, S.J.**, Karnik, N., & Gustafson, E. (2014, March). Executive dysfunction and psychiatric disorders among homeless youth in Chicago. Invited continuing education series lecture to The Night Ministry Youth at Risk Professional Development Training Program, Chicago, IL.

33. Karnik, N.S. & **Hunter, S.J.** (2014, April). Coming out in the pediatrician's office: What to do when your patient identifies as GLBT or questioning. Invited lecture to the Pediatrics Residents Noon Conference, Department of Pediatrics, The University of Chicago Medicine and Biological Sciences, Chicago, IL.

34. **Hunter, S.J.** (2014, May). From risk to resilience in homeless youth: Considering the role of executive functions within an intervention framework. Invited address to the 2014 Midwest Neuropsychology Group Annual Meeting, Milwaukee, WI.

35. **Hunter, S.J.** (2014, October). The impact of disordered sleep on developing executive functioning in children and adolescents. Invited lecture to the Translational Research Lecture Series, Section of Pediatric Sleep Medicine, Department of Pediatrics, The University of Chicago, Chicago, IL.

36. **Hunter, S.J.** (2014, November). A developmental neuropsychological approach to understanding risk and resilience in urban homeless youth. Invited lecture to the Clinical Psychology Brown Bag Seminar, University of Illinois at Chicago, Chicago, IL.

37. **Hunter, S.J.** (2015, April). The impact of disordered sleep on developing cognition and behavior in children and adolescents. Invited lectures at Pope John XXIII School, Evanston, IL.

38. **Hunter, S.J.** (2015, October). The Mind's Eye: A neuropsychologist muses on collecting and curating. Invited lecture for the Comfort Society Presents lecture series, Comfort Station, Chicago, IL.

39. **Hunter, S.J.** (2015, October). A neuropsychologist as collector and curator. Invited lecture and discussion, D. Devening, "Why Make Art Now?" Arts Administration course, School of the Art Institute of Chicago.

40. **Hunter, S.J.** (2016, April). Urban youth homelessness, executive functioning, and psychopathology: Developing a model of neurodevelopmental risk and resilience. Invited lecture for the 23rd Butters-Kaplan West Coast Neuropsychology Conference: *Recovery and resilience in children with neurodevelopmental and acquired brain disorders* (Chairs: D. Delis & H.G. Taylor). Hyatt Regency La Jolla-San Diego, CA.

41. Amir, E. & **Hunter, S.J.** (2016, April). Gallery Talk: Einat Amir & Scott J Hunter. Invited discussion at Aspect/Ratio Projects, Chicago, IL.

42. **Hunter, S.J.** (Chair) (2016, May). A lifespan approach to understanding ADHD: Empirically supported assessment, diagnosis, and treatment. Invited workshop for the Illinois Psychological Association, Argosy University-Chicago, Chicago, IL. (Featuring lectures by S.J. Hunter, M. Scott, T. Drossos, S. Mathies-Dinizulu, R. Renfro, and K. Radwan).

43. **Hunter, S.J.** (2016, August). Social media and psychological practice: Ethical guidelines for optimal use. Invited continuing education ethics lecture for the Psychology faculty, Department of Psychiatry and Behavioral Neuroscience, The University of Chicago, Chicago, IL.

44. **Hunter, S.J.** (2016, August). The impact of sociocultural and contextual factors when assessing cognition and behavior. Invited lecture for Afzal, K., Spitz, D., Radwan, K., Lu, N., **Hunter, S.J.**, Drossos, T., & Anam, S. *Promoting evidence based intervention in mental health across disciplines: Updates in psychiatric assessment, diagnosis, and treatment*. The University of Chicago Center in Beijing, Beijing, China.

45. **Hunter, S.J.** (2016, August). Update on Autism Spectrum Disorder. Invited lecture for Afzal, K., Spitz, D., Radwan, K., Lu, N., **Hunter, S.J.**, Drossos, T., & Anam, S. *Promoting evidence based intervention in mental health across disciplines: Updates in psychiatric assessment, diagnosis, and treatment*. The University of Chicago Center in Beijing, Beijing, China.

46. **Hunter, S.J.** (2016, November). Collecting and curating contemporary art: Perspectives from a neuropsychologist collector. Invited lecture and discussion, D. Devening, "Why Make Art Now?" Arts Administration course, School of the Art Institute of Chicago.

47. Hampel, K., Christian, K., and **Hunter, S.J.** (2016, November). Materials of fear. Panel discussion at LATITUDE, Chicago, IL.

48. **Hunter, S.J.** (2016, December). Panel moderator and contributor, Feminist advice from the city of broad shoulders. Heaven Gallery, Chicago, IL.

49. **Hunter, S.J.**, Hampel, K., & Lozano, I. (2017, July). The transparency of evil. Panel discussion at South of the Tracks, Chicago, IL.

50. **Hunter, S.J.** (2017, October). Neuropsychological assessment and monitoring of pre and post-surgical outcomes in pediatric epilepsy. Invited lecture to the 2017 CIP Neuro Forum: Course of new technology in pediatric neurology, Capital Institute of Pediatrics, Beijing, China.

51. **Hunter, S.J.** (2018, May). How trauma situates within us. Invited lecture for R. Lichtzier (Chair), *MeToo//IRL – A participatory workshop.* In conjunction with *The Dangerous Professors.* Houston, TX: Flatland Gallery.

52. **Hunter, S.J.** (2018, October). *On Anxiety*: A public intervention. Lecture and panel discussion in conjunction with *On Anxiety*, curated by Gwendolyn Zabicki. Glen Ellyn, IL: Cleve Carney Gallery, College of DuPage.

53. Fuentes, M.A. Clauss-Ehlers, C., & **Hunter, S.J.** (2018, October). Applying the revised Multicultural Guidelines to the Latinx Community: Implications for practice, research, and consultation. Workshop presentation to the 2018 Biennial Conference of the National Latina/o Psychological Association, San Diego, CA.

54. Jointer, T. (Speaker) and **Hunter, S.J.** (Moderator) (2021, May). The power of space in the midst of harm. Trauma Interest Work Group Speakers Series on Schools, Stress, and the Pandemic. The Mansueto Institute on Urban Innovation, The University of Chicago, Chicago, IL.

Press and Media:

1. Deerin, M.M. (2001, 9/28). The teen brain theory. *Chicago Tribune.*
2. Ferkenhoff, E. (2006, 7/10). How schools are pulling rank. *Time.com*
3. Irvine, M. (2010, 1/11). Study: Youth now have more mental health issues. *Associated Press.*
4. Hoffman, L. (2010, 1/15). Depression, anxiety higher among today's teens, landmark study finds. *Chicago Parent.*
5. Hoffman, L. (2010, 2/9). Older mothers more likely to have a child with autism. *Chicago Parent.*
6. Moyer, C. (2010, 6/21). DSM-5 revised in response to comments; clinicians prepare to field-test. *AMA Medical News.*
7. Iliades, C. (2010, 8/31). The past, present, and future of ADHD. *Everyday Health.*
8. Eler, A. (2010, 8/31). Collector conversation with Scott J. Hunter. *Chicago Gallery News.*
9. Howard, J. (2010, 9/27). Severe acne may prompt suicidal thoughts. *The Columbia Chronicle.*
10. Gordon, S. (2010, 10/12). Siblings of autistic children may also have subtle traits. *US News & World Report.*
11. Melnick, M. (2010, 10/14). 1 in 5 children with an autistic sibling show subtle symptoms too. *Time:Healthland.*
12. Iliades, C. (2010, 10/18). 10 theories about ADHD causes. *Everyday Health.*
13. Quraishi, A. (2011, 3/21). Careers for adults with autism. *WTTW-Channel 11 Chicago Tonight.*
14. Evans, C. (2012, 1/30). What really causes ADHD? *Black Doctor.org*
15. Herman, J. (2012, 6/28). Art in Dearborn Park. *TimeOut Chicago.*
16. Blakeley, D. (2013, 3/20). CDC says one in fifty children with Autism. *WLS-7 ABC Chicago Nightly News.*
17. Dluzen, R. & Velez, P. (2013, 4/25). We went to Chicago: West of the Loop edition. *Art F City.*
18. Choolijian, L. (2013, 8/26). Year 25 studies the brain. *WBEZ 99.1 The Afternoon Shift with Niala Boodhoo.*
19. Schroeder, L. (2013, 8/29). Causes of autism remains elusive but new study shows higher risk with induced labor. *Medill Reports Chicago, Northwestern University.*
20. Dluzen, R. (2013, 9/1). Collecting Chicago. *art ltd. Magazine.*
21. Foumberg, J. (2013, 9/19). Art 50: Chicago's Visual Vanguard. *Newcity.*
22. Reitz, S. (2013, 11/11). Behavior and the brain: A brief glance into the work of Dr. Scott Hunter. *The Triple Helix Online, The University of Chicago.*
23. Morris, M. (2014, 11/14). 5 shows to see now. *Newcity.*
24. Reichert, E. (2015, 12/17). Top 5 shows Newcity didn't review: Newcity's top 5 of everything 2015: Art. *Newcity.*

25. Smith, J. (2016, 10/29). Homeless youth and risk: Untangling role of executive function. *Clinical Psychiatry News.*
26. Hazel, T. (2017, 10/4). October Art Picks: A is for Artist. *Sixty Inches from Center.*
27. Wawzenek, T. (2017, 10/12). A is for Artist brings "outsider art" inside. *Third Coast Review.*
28. Reichert, E. (2017, 10/27). Art Top 5: November 2017 – 5. A is for Artist. *Newcity.*
29. Wood, M. (2018, 1/16). Spotting risk-taking behavior in homeless youth: A first step for better care. *The Forefront: The University of Chicago Medicine Science News (Neuroscience).*

Curatorial Projects:

Psychosexual: An exploration of the abstracted gesture. Andrew Rafacz Gallery, Chicago, IL. April 6, 2013 - May 25, 2013

Sticky & Sweet. Terrain, Oak Park, IL. April 6-30, 2014

A rose is a rose is a rose. Aspect Ratio, Chicago, IL. October 24 - November 29, 2014

Second Terrain Biennial: Aay-Preston Myint at 1155 Lyman Ave. Terrain, Oak Park, IL. August 23 - September 30, 2015

Finocchio. The Franklin, Chicago, IL. September 5-26, 2015

DominoDomino and The Franklin in *The Great Good Place:* Brandon Alvendia at Threewalls, Chicago, IL. November 7–December 12, 2015 (co-curator with Edra Soto)

Displacement. South of the Tracks, Chicago, IL. June 19 - July 20, 2016

The Transparency of Evil: Ivan LOZANO and Kate Hampel. South of the Tracks, Chicago, IL. June 4 – July 15, 2017

A is for Artist. Ukrainian Institute of Modern Art, Chicago, IL. October 6 – November 26, 2017

A Creep that Snakes: A tic of words and symbols. Judith Brotman and Dutes Miller. Tiger Strikes Asteroid, Mana Contemporary, Chicago, IL. September 15 – October 19, 2019.

Catalogs:

Psychosexual: An exploration of the abstracted gesture. Chicago, IL: Andrew Rafacz Gallery. 2013. http://issuu.com/scottjhunter/docs/psychosexual_2013_arg_sjh/1

Finocchio. Chicago, IL: The Franklin. 2015. http://issuu.com/scottjhunter/docs/finocchio_catalog_hunter_franklin_1

A is for Artist. Chicago, IL: Ukrainian Institute of Modern Art. 2017.

Catalog Essays and Contributed Writings to Arts Publications:

Hunter, S.J. (2013). Richard Hull: Neural imagist. *Richard Hull: Recent Paintings.* St. Louis, MO: Bruno David Gallery. http://issuu.com/brunodavidgallery/docs/richard-hull_catalog_v1_2013_issuu_

Hunter, S.J. (2015). Drawn through degradation and desire: In conversation with Larassa Kabel. *Larassa Kabel: Stag Park*. Chicago, IL: The Mission Projects.

Hunter, S.J. (2016). Confessions of a suburban sissy boy feminist all grown up. In J. Caponigro (Ed.), *Feminist advice from the city of big shoulders*. Chicago, IL: Heaven Gallery.

Hunter, S.J. (2016). On connections that unfold and reform across time. *Judith Brotman and Fraser Taylor: Missed and other connections.* Riverside, IL: Freeark Gallery, Riverside Arts Center.

Hunter, S.J. (2017). The transparency of evil. *Ivan LOZANO and Kate Hampel: The Transparency of Evil.* Chicago, IL: South of the Tracks Projects.

Hunter, S.J. (2017). On *Ziziphus foliatus.* Maria Petschnig at TRIUMPH. Chicago, IL: TRIUMPH Gallery.

Hunter, S.J. (2019). On the parallels that creep up and snake through us. *Judith Brotman and Dutes Miller: A Creep that Snakes: A tic of words and symbols*. Chicago, IL: Tiger Strikes Asteroid.

Cultural, Civic, and Nonprofit Development Committees, Memberships, and Board Memberships:

DePaul Art Museum, DePaul University, Chicago, IL
- Member, Leadership Circle Committee (2016-present)
- Member, DPAM Advisory Board (2017-present)
  - *Chair*, DPAM Advisory Board (2018-present)

Roots & Culture Contemporary Arts Program, Chicago, IL
- Annual Benefit Fundraising Committee (2013)
- Member, Board of Directors (2014-2019)
  - *Secretary* (2015-2019)
- Member, 2016 Exhibition Review Panel (2015-16)
- Annual Benefit Committee (2019, 2020)

International Contemporary Ensemble, Chicago, IL & New York, NY
- Member, Board of Directors (2010-2015)
- Co-Chair, Development Committee (2013-2015)
- Chair, 2011 ICE Chicago Benefit Committee
- Chair, 2012 ICE Chicago Benefit Committee
- Chair, 2013 ICE Chicago Benefit Committee
- Member, ICE Board Emeritus Committee (2015-present)

Society for Contemporary Art, The Art Institute of Chicago, Chicago, IL
- Member, Programming Board (2008-10)
- Member, 2010 Benefit Planning Committee
- Member, 2010 Benefit Auction Acquisition Committee
- Member, Acquisition Committee (2010-12)
- Co-Chair, Art Auction Acquisitions, 2012 Benefit Committee
- Member, Board of Directors (2011-14)
  - *Vice-President* and Chair of Programming (2012-14)
- Co-Chair, Art Auction Acquisitions, 2014 Benefit Committee
- Member, 2016 Benefit Auction Acquisition Committee

The Renaissance Society, The University of Chicago, Chicago, IL
- Member, Auction Acquisition Committee (2010-11)

Member, Annual Benefit Committee (2010-11)

Chicago Artists' Coalition, Chicago, IL
Member, Collectors Circle Advisory Committee (2012-13)

Gallery 400, College of Architecture and the Arts, University of Illinois at Chicago
Donor Member, Forum 400 (2010-present)

Chicago Gallery Weekend, Chicago, IL
Host Committee (2011-15)

Threewalls, Chicago, IL
Host Committee, 10th Anniversary Benefit (2013)

The Mission, Chicago, IL
Member, Sub-Mission Artist Selection Committee (2014-15)

South of the Tracks Projects, Chicago, IL
Co-principle and patron (2015-18)

Spudnik Press Cooperative, Chicago, IL
Member, Annual Benefit Host Committee (2018; 2019)

BASEMENT: A Project Space, Chicago, IL
Proprietor (2019-present)

New Art Dealers Alliance (NADA), New York, NY
Professional Member (2020-present)

Specific Research, Clinical, and Professional Interests:

Identification of the neural mechanisms underlying attention, memory, language, executive function, and behavior regulation, and their developmental trajectories, as assessed through multimethod approaches that include a combination of standardized psychometric measures and imaging technologies (including EEG, ERPs, ECoG, fMRI).

Development of executive and behavior regulatory function in typical and developmentally disordered children, adolescents, and emerging adults. Specific interest in understanding and defining the relationship of executive control to behavior and attentional regulation in children, adolescents, and emerging adults with seizure disorders, in-utero HIV-exposure and subsequent antiretroviral exposure or treatment, neurogenetic and developmental anomalies (extremely premature and low birth weight infants, Neurofibromatosis, Opsoclonus-Myoclonus Syndrome, Neonatal Diabetes Mellitus), severe neurodevelopmental pathology (Autism Spectrum Disorders; Atypical Attention Deficit Hyperactivity Disorder; intellectual disability syndromes); sleep disorders; and in children affected by social and environmental stressors (homelessness, trauma, poverty).

Neurodevelopmental impact of socioeconomic adversity, environmental insult, and trauma, with a specific emphasis on the impact of homelessness and its sequelae on child and adolescent brain development and adaptive functioning, and educational attainment.

Pediatric medical neuropsychology, including assessment of pre and post intervention status of children with neurological compromise (e.g., neuro-oncological insults; epilepsies; prenatal and neonatal complications; neurogenetic disorders) and medical illnesses (e.g., diabetes; HIV-related syndromes), and determination of appropriate educational interventions and accommodations to maximize effective development.

Identification and treatment of behavioral and emotional sequelae of medical illness (e.g., Neurofibromatosis Type-1; childhood cancers and their treatment).

Monitoring of pharmacological interventions and their impact on cognitive and behavioral functioning in treatment-responsive epilepsy patients; and efficacy of surgical interventions for intractable epilepsy patients, including implantation of vagal nerve stimulators.

Executive functioning interventions for children and adolescents: development and implementation.

Ethical decision making regarding agency and capacity to make effective medical decisions in the context of impaired or disordered executive functioning, and the development of a vulnerability analysis model utilizing executive functioning as a component factor.

Special education programming, development, and policy.

Transdisciplinary investigations between the fine arts, humanities, and neuroscience. Develop programming to address collaborative educational and exhibition opportunities.

Fine arts curation, programming, and philanthropy.

Professional References:

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