2023 HMS Psychiatry Research Fellowship Application

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Please be sure to read the complete <u>Fellowship Award Descriptions</u> before proceeding with this application.

Eligibility Requirements Applicants must meet the following criteria to be considered for an award:

- For only the Dupont Warren Fellowship, MD degree at a PGY-4 level or higher at time of application for a full stipend
- For only the Dupont Warren Fellowship, MD degree at a PGY-3 level at time of application for a stipend paid at half the PGY-4 rate
- For the Kaplen, Zinberg, or Livingston Fellowships, MD degree (at PGY-4 level or higher), and/or PhD degree, for full stipends; Psychology trainees are eligible to apply if they will have received their PhD by July 1st of the year in which the fellowship begins
- For the Kaplen, Zinberg, or Livingston Fellowships, MD degree (at PGY-3 level or higher), and/or PhD degree, for a stipend paid at half the PGY-4 rate; Psychology trainees are eligible to apply if they will have received their PhD by July 1st of the year in which the fellowship begins
- Be a member of the HMS Department of Psychiatry
- No more than five years have passed since the end of US accredited clinical training Cannot hold a faculty appointment in the Department of Psychiatry of Assistant Professor or higher during fellowship period
- Applicants who have received NIH R or K awards as the PI are not eligible to apply
- Agree to submit progress reports at six month intervals, including a final report upon completing the fellowship

Note: The stipend rates are calculated using the MGH PGY-5 and PGY-4 pay scales which are available online.

We encourage applications from individuals that are from systematically marginalized groups that have historically been underrepresented in health-related science research. The term "systematically marginalized" refers to the challenges facing individuals because of their race, ethnicity, gender expression or sexual orientation, socioeconomic status, or similar factors. Eligibility follows NIH criteria for underrepresented populations in U.S. biomedical, clinical, behavioral, and social sciences research enterprise:

Individuals from racial and ethnic groups that have been shown by the National Science

Foundation to be underrepresented in health-related sciences on a national basis: individuals identifying their race or ethnicity as Black or African American, Hispanic or Latino or Latinx, American Indian or Alaska Native, Native Hawaiian, and other Pacific Islander. In addition, it is recognized that underrepresentation can vary from setting to setting; individuals from racial or ethnic groups that can convincingly demonstrate being underrepresented at HMS are encouraged to participate to enhance diversity.

Individuals with disabilities, who are defined as those with a physical or mental impairment that substantially limits one or more major life activities, as described in the <u>Americans with Disabilities Act of 1990</u>, as amended.

Individuals identifying with sexual and gender minority populations, including but not limited to lesbian, gay, bisexual, transgender and intersex (LGBTI) persons"

Individuals from disadvantaged backgrounds, defined as those who meet two or more of the following criteria:

- Were or currently are homeless, as defined by the McKinney-Vento Homeless Assistance Act (Definition: https://nche.ed.gov/mckinney-vento/);
- Were or currently are in the foster care system, as defined by the Administration for Children and Families (Definition: https://www.acf.hhs.gov/cb/focus-areas/foster-care);
- Were eligible for the Federal Free and Reduced Lunch Program for two or more years (Definition: https://www.fns.usda.gov/school-meals/income-eligibility-guidelines); Have/had no parents or legal guardians who completed a bachelor's degree (see https://nces.ed.gov/pubs2018/2018009.pdf);
- Were or currently are eligible for Federal Pell grants (Definition: https://www2.ed.gov/programs/fpg/eligibility.html);
- Received support from the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) as a parent or child (Definition: https://www.fns.usda.gov/wic/wic-eligibility-requirements).
- Grew up in one of the following areas: a) a U.S. rural area, as designated by the Health Resources and Services Administration (HRSA) <u>Rural Health Grants Eligibility Analyzer</u>, or b) a <u>Centers for Medicare and Medicaid Services-designated Low-Income and Health</u> <u>Professional Shortage Areas</u> (qualifying zipcodes are included in the file).
- Only one of the two possibilities listed can be used as a criterion for the disadvantaged background definition.

Fellowship Application Instructions

Applicants should complete the questions in the fellowship application form below. In addition, the following items must be uploaded as a single PDF in the relevant part of the application form:

1) A **cover letter**, not to exceed two pages, from the applicant explaining how the Fellowship year will fit into his/her upcoming career plans. The letter should include details

of the candidate's training activities during the course of the Fellowship (e.g., human subjects training, coursework, skills development, grant preparation, etc). The letter should also describe any past or current research experience and committed or pending external funding.

- 2) A current **curriculum vitae** in the current Harvard format (http://fa.hms.harvard.edu/faculty-medicine-cv-guidelines). Although the Harvard format does not allow the listing of submitted papers, please add these along with the name of the journal to which the manuscript was submitted.
- 3) A **Research Plan**. This should include: (a) title of project, (b) brief abstract not to exceed 150 words, (c) description of the specific aims of the project, (d) background and significance of the proposed research project, (e) description of the research design, (f) description of methods, (g) discussion of proposed analyses to be used in the project, and (h) timeline for completing the project during the fellowship year. If a two-year full-time award is requested, a clear rationale for the extended project timeline should be provided. The Research Plan has an absolute limit of 4 pages, single-spaced, with standard type size of 15 characters per inch (using Arial or Times New Roman 11 font). One extra page will be allowed for a listing of referenced literature. Appendices will not be accepted.
- 4) A **listing of other research resources available** to support the project (e.g., supplies, technical assistance, diagnostic laboratory tests).
- 5) Mentoring is a key component of evaluating the candidate for an award as well as an important factor in the evaluation of the application. The mentor will work with the applicant to select a project that is feasible within the time frame and budget proposed. Support from the Fellow's faculty mentor is an important factor in the evaluation of the application. The mentor must address each item in the Mentor's Statement.
- 6) All projects will be reviewed closely for feasibility and the recruitment plan will be evaluated. Clinical trials in particular will need to clearly demonstrate feasibility. Projects involving large scale clinical trials with multiple groups must provide additional assurances that the proposed study has sufficient financial support and can be completed in the proposed time period. Projects that include drug studies or new devices that do not have approved **IND or NDA certification** at the time of application will not be considered.
- 7) Projects will be reviewed for their potential to contribute to health equity, including, but not limited to, fostering research that measures and reduces inequities in psychiatric treatment, and/or increased involvement (among mentors, research teams and study participants) of individuals from systematically marginalized groups/backgrounds.
- 8) The applicant is expected to work closely with their mentor to develop an application that is both scientifically rigorous and feasible within the budget and time commitment proposed.

but is entirely optional for Livingston applicants, and for the latter, would only include a statement of commitment to protect time for research by the department head to demonstrate institutional support for the feasibility of the project)
10) For the Livingston Fellowship only : please also include a completed <u>Budget Page</u> , specifying how the award will be utilized, with a brief justification for each item. If salary support is requested for a research assistant, the applicant must specify the tasks to be done by the research assistant and the tasks to be done by the applicant.
What is your full name (please include your professional degree(s)):
What is your primary institutional affiliation?
O Beth Israel Deaconess Medical Center
O Boston Children's Hospital
O Brigham and Women's Hospital
Cambridge Health Alliance
Massachusetts General Hospital
O McLean Hospital
O VA Boston Healthcare System
Other (please specify)

9) A **letter from the head of the sponsoring hospital department** which needs to include a statement of willingness to assume the cost of fringe benefits, and commitment to protect

Wh	at is your email address?
То	which fellowship(s) are you applying? (select all that apply)
	Dupont Warren Fellowship
	Kaplen Fellowship on Depression
	Zinberg Fellowship in Addiction Psychiatry Research
	Livingston Fellowship
For	the Dupont Warren Fellowship, please indicate the type of effort for which you are applying:
	1 year at 80% time (for PGY-4 or higher at the time of application)
	2 years at 50% time (for PGY-4 or higher at the time of application)
	2 years at 80% time (for PGY-4 or higher at the time of application)
	1 year at 50% time (only available to PGY-3s at the time of application)
	the Kaplen or Zinberg Fellowship, please indicate the type of effort for which you are olying:
	1 year at 80% time (for PhD or MD PGY-4 or higher at time of application)
	2 years at 50% time (for PhD or MD PGY-4 or higher at time of application)
	1 year at 50% time (only available to MD PGY-3s at the time of application)

For the Living requesting:	ston Fellowship, please indicate the amount of research funds that you are
Please confirm	n your eligibility (select all that apply):
training	No more than five years have passed since the end of your US accredited clinical
	You have not already received an NIH R or K award as the PI
or higher i	You do not already hold a faculty appointment at the level of Assistant Professor n the Department of Psychiatry
remainder institution	The fellowship will pay 25% of the fellow's institution's fringe benefits; the of fringe benefits and indirect costs must be funded by the fellow's sponsoring
What is the tit	le of your research project?
Please enter t	the name of your mentor(s):
*	

Please upload a single PDF document that contains all of the following items: a Cover Letter, your CV, your Research Plan, a listing of Other Research Resources, the Mentor's Statement, IND or NDA certification (if relevant), a letter from the head of the sponsoring hospital

Livir	ngston Fe	llowship applicants). (Please refer to the application instructions to be sure that his list contains the required information.)
Opti	ional: Wha	at is your gender?
		cis woman
		cis man
		transgender woman
		transgender man
		a non-binary person
		I prefer to self-identify
		I prefer not to disclose
Opti	ional: Wha	at is your race? You may choose more than one option.
	maintain t "Americar Tribe, Ma <u>y</u>	American Indian or Alaska Native (Includes all individuals who identify with any of al peoples of North and South America, including Central America, and who ribal affiliation or community attachment. It includes people who identify as Indian" or "Alaska Native" and includes groups such as Navajo Nation, Blackfeet yan, Aztec, Native Village of Barrow Inupiat Traditional Government, and Nome ommunity)
	ethnic are	Asian (Includes all individuals who identify with one or more nationalities or

Examples of these groups include, but are not limited to, Chinese, Filipino, Asian Indian, Vietnamese, Korean, and Japanese. The category also includes groups such as Pakistani, Cambodian, Hmong, Thai, Bengali, Mien, etc.)
Black or African American (Includes all individuals who identify with one or more nationalities or ethnic groups originating in any of the black racial groups of Africa. Examples of these groups include, but are not limited to, African American, Jamaican, Haitian, Nigerian, Ethiopian, and Somali. The category also includes groups such as Ghanaian, South African, Barbadian, Kenyan, Liberian, and Bahamian.)
Native Hawaiian and Pacific Islander (Includes all individuals who identify with one or more nationalities or ethnic groups originating in Hawaii, Guam, Samoa, or other Pacific Islands. Examples of these groups include, but are not limited to, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, and Marshallese. The category also includes groups such as Palauan, Tahitian, Chuukese, Pohnpeian, Saipanese, Yapese, etc.)
White (Includes all individuals who identify with one or more nationalities or ethnic groups originating in Europe, the Middle East, or North Africa. Examples of these groups include, but are not limited to, German, Irish, English, Italian, Lebanese, Egyptian, Polish, French, Iranian, Slavic, Cajun, and Chaldean.)
Other
Prefer not to disclose
Is your nationality or ethnic group within this Asian race category underrepresented in medicine/research?
○ Yes
○ No
Ounsure

Optional: Which underrepresented nationality or ethnic group within this Asian race colors.	ategory are
Optional: Is your ethnicity of Hispanic, Latino, or Spanish origin?	
O No, not of Hispanic, Latino, or Spanish origin	
O Yes, Mexican, Mexican American, Chicano	
O Yes, Puerto Rican	
O Yes, Cuban	
Yes, another Hispanic, Latino, or Spanish origin	

_	t you feel are relevant to increasing the diversity, equity, and inclusion of the information will be kept confidential by the research committee.)
	Race or ethnicity in any of the following categories: Black, Latino, American ve Hawaiian, or Pacific Islander
	ndividuals from racial or ethnic groups that can be demonstrated convincingly to resented by the grantee institution
	Sexual and gender minority, including but not limited to lesbian, gay, bisexual, and intersex (LGBTI) persons
	Disability
Н	domelessness
F	oster care
F	ree lunch program
S	SNAP/WIC assistance
Р	Pell Grant eligible
F	First-generation college student
R	Rural or HPSA residence
	bout any other background information that you feel is relevant to increasing the , and/or inclusion of the fellowship.

Optional: We invite you to check as many of the following categories as they relate to your

lease tell us a	oout any other ir	nformation abo	out vour appli	cation that v	ou fool is r	
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