

gerontology news

The Gerontological Society of America®

January 2022

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Revisit GSA's Latest Momentum Discussions

GSA's Momentum Discussions series is intended to stimulate dialogue on trends with great momentum to advance gerontology. The following programs were conducted during the GSA 2021 Annual Scientific Meeting and are now available for viewing online:

- Risk Communication for Vaccine Preventable Illnesses: Addressing Concerns, Facilitating Behavior Change
- Fostering Resilience and Fighting Poverty
- Long-Term Care and Infection Control: Doing it Differently
- The Evolving and Essential Role of Interdisciplinary Care of the Mouth, Ears and Eyes of Older Adults
- Exploring the Economic Contributions of People 50 and Over and the Business Case and Innovative Best Practices for Supporting Healthy Longevity
- A Better, New Normal for Covid 19 Vaccine Distribution and Administration

Join a GSA Interest Group

Did you know GSA has more than 50 interest groups covering a range of topics? They are a great way for members to connect with others who share their interests. They also help members stay informed about topics outside their areas of expertise. Each GSA interest group has its own GSA Connect Community to share information and resources. Visit www.geron.org/interestgroups to learn more.

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New GSA President Shares Outlook for 2022

By Peter Lichtenberg, PhD, ABPP, FGSA

It is absolutely an honor to serve as the 2022 president of GSA. I reflect fondly upon my first GSA Annual Scientific Meeting in 1987, which I came to as an assistant professor and only knew one person in the organization (Dr. Victor Cicirelli — a great mentor from Purdue where I did my graduate work). One truly wonderful thing about GSA is how many opportunities there are to get involved — to share research, connect with colleagues, to mentor and be mentored.



Lichtenberg

Now, 35 years later it is my privilege to follow an exceptional president, Dr. Terri Harvath, and will build upon her conference theme of “Transformation.” GSA is so fortunate to have an outstanding CEO and equally outstanding staff, without whom none of the great progress made by GSA would be possible. I will strive to uphold what I believe are the core values of GSA — to enhance research, research translation

and policy, to foster mentoring opportunities, to champion older people and to highlight the accomplishments of our members.

Our annual conferences for 2020 and 2021 have been virtual and it is my hope (along with all of our members and GSA staff) that we will be holding our 2022 Annual Scientific Meeting in person in Indianapolis in early November. Now that I know and care about so many GSA members, I am envisioning a wonderful reunion with them and an opportunity to meet new colleagues at the GSA meeting!

Here are the themes I've chosen for this conference.

“Embracing our Diversity.” Diversity is found in our members' disciplinary backgrounds, and in methodological and measurement approaches. This interdisciplinary and often “team science” approach deepens our understanding of aging across the life course. Embracing diversity also means embracing social justice. The Diversity and Inclusion Working Group chaired by Drs. Keith

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Nutritional Components May Promote Healthy Aging

Emerging research indicates that nutritional components that target specific mechanisms associated with age-associated cellular decline (AACD) hold promise for improving the health and well-being of adults.



“Cellular Nutrition and Its Influence on Age-Associated Cellular Decline,” the latest issue of GSA's *What's Hot* newsletter with accompanying infographic, provides an overview of current research regarding evidence regarding the influence of nutritional components on health and aging.

“Declining mitochondrial health is increasingly being recognized as a common mediator of declining function and development of chronic diseases associated with aging,” noted Nathan K. LeBrasseur, PT, PhD, FGSA, a member of the

newsletter's content development faculty who is professor and co-chair of research at the Department of Physical Medicine and Rehabilitation and co-director of the Paul F. Glenn Center for Biology of Aging Research at the Mayo Clinic. “This report describes contributions of mitochondria to cellular functions and homeostasis and reviews emerging evidence regarding how nutritional components can influence these functions.”

Mitochondria are commonly known as the powerhouses of cells and are responsible for the production of cellular energy. They also regulate cellular metabolism, apoptosis (programmed cell death), signaling by producing reactive oxygen species (ROS). ROS are highly reactive molecules derived from oxygen that are key to many biochemical reactions; however, when present in excess, they can result in molecular damage. Mitochondria also have their own DNA (mtDNA) that encode for 13

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Investments in Science Still Provide the Best Returns

By James Appleby, BSPHarm, MPH • jappleby@geron.org

[Last year at this time, I highlighted a new survey](#) that showed strong support for science within the U.S. But even as most felt that science could steer us out of the COVID-19 pandemic, how much trust did people really have? It's been hard to tell as we have faced challenges with vaccine adoption and are now confronting new coronavirus variants.

But we do have some new data [recently reported by the Wellcome Global Monitor](#) — the largest global survey of how people think and feel about science — that found that levels of trust in scientists have *increased* since the last time the survey was conducted, in 2018. Conducted by Gallup World Poll, the survey asked more than 119,000 people in 113 countries and territories, aged 15 years and over, about their views on science during the pandemic from August 2020 to February 2021. Notably, people who said they trust in science and scientists “a lot” rose by nine percentage points since the 2018 survey.

We shall see if these numbers are sustained the next go around, particularly when the rollout of vaccines and new therapeutics can be taken into consideration. With many loud voices seeking to discredit valid science, GSA will continue to amplify the value of science and support its members in their efforts to do so as well.

Your work is essential and contributes to meaningful lives as we age. Science is the bedrock upon which GSA is founded. And we can point to many recent examples that demonstrate science is still valued.

For example, we are on the cusp of a major expansion to the National Institutes of Health (NIH), the largest supporter of biomedical research in the world. Plans with bipartisan support continue to move forward for the development of the [Advanced Research Projects Agency for Health](#) (ARPA-H), which would be housed at NIH. This new agency — inspired by the achievements driven by the Department of Defense's Defense Advanced Research Projects Agency (DARPA), which was instrumental in accelerating many technologies essential in our daily lives such as the Internet and the Global

Positioning System — is designed to “embrace bold and high-risk, high reward solutions with the potential to accelerate disruptive progress across an array of diseases and conditions and at levels ranging from the molecular to the societal.”

While not necessarily making headlines, science is still valued in the halls of Congress, as seen by the recent Senate Special Committee on Aging hearing on November 18, “[Inclusive Disaster Management: Improving Preparedness, Response, and Recovery](#).” As you'll read in Policy News on pages 4 and 5, this hearing included testimony from GSA members Sue Anne Bell, PhD, FNP-BC, and Wanda Raby Spurlock, RN, GERO-BC, PMH-BC, CNE, FNGNA, ANEF, FAAN.

The public still has a thirst for good science. Only a few weeks after the above hearing, a CBS special titled “[Forever Young: Searching for the Fountain of Youth](#)” included interviews with Steven Austad, PhD, FGSA, Nir Barzilai, MD, Morgan Levine, PhD, and Thomas Perls, MD, FGSA.

GSA will continue to provide the premier networking and presentation venue for research in the aging field through its Annual Scientific Meeting. We had robust participation during the Society's second all-online conference in November, and there is a thirst to reunite in-person this November in Indianapolis. Our call for abstracts will be issued shortly. And be sure to read this month's cover article from new President Peter A. Lichtenberg, PhD, ABPP, FGSA, which outlines the 2022 Annual Scientific Meeting theme.

By submitting research to our meeting, you are advancing the state of our field. It's just one way that all GSA members are able to be champions for science, whether you are researchers, clinicians, educators, or aging professionals. And as the world enters a new year, with uncertainty still to be found on several fronts, GSA remains committed to helping you be successful in your scientific pursuits.

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In Memoriam

Lissy Jarvik, MD, PhD, FGSA, a past chair of GSA's Health Sciences Section (in 1984) and a recipient of GSA's Robert W. Kleemeier Award (in 1986), passed away on October 1, 2021, at age 97.

Jarvik, a professor emerita of psychiatry and biobehavioral sciences at the David Geffen School of Medicine at UCLA and distinguished physician emeritus with the U.S. Department of Veterans Affairs of the Greater Los Angeles Healthcare System, was one of the first physicians to demonstrate that mental decline was not a part of the normal aging process. From 1987 to 1993 Jarvik was the first woman psychiatrist, and the second woman ever appointed as a distinguished physician in the U.S. Department of Veterans Affairs.

In 1988 she co-authored "Parentcare: A Commonsense Guide for Adult Children." For her "distinguished contributions in the general field of psychiatry and mental health," Jarvik was the first recipient of the American College of Physicians William C. Menninger Memorial Award in 1993.

Sheldon S. Tobin, PhD, FGSA, passed away October 20, 2021. He was an emeritus professor at the State University of New York at Albany, and previously served as director of the Ringel Institute of Gerontology while also teaching at Albany Medical College.

Tobin served as editor-in-chief of *The Gerontologist* from 1985 to 1988, and was chair of the Academy for Gerontology in Higher Education's Development Committee from 1987 to 1989.

He was admitted to the University of Chicago at the age of 16, and had a brief break from academia during the Korean War where he served in the Army as a Medical technician stationed in Seattle. Eventually he joined the faculty at the University of Chicago and was instrumental in the field of gerontology. He published groundbreaking articles and conducted pioneering research whose effects are still evident today in the caring of older adults.

New Books by Members

- "Aging and Social Policy in the United States (First Edition)," by Nancy Kusmaul, PhD, MSW, FGSA. Published by Cognella, 2022.

Member Spotlight

GSA's website features monthly Q&A sessions with distinguished members. The current spotlight shines on:

Jordan P. Lewis, PhD, MSW, FGSA

Colleague Connection

This month's \$25 amazon.com gift certificate winner:

Zachary Baker PhD

The recipient, who became eligible after referring new member **Megan Britton, PhD** was randomly selected using randomizer.org. For more details on the Colleague Connection promotion visit www.geron.org/connection.

Members in the News

- A November 3, 2021, NBC News story titled "Life expectancy fell sharply in the U.S. last year among high-income countries" included quotes from Theresa Andrasfay, PhD.
- On November 15, 2021, U.S. News & World Report published an article by Heidi Harriman Ewen, PhD, FGSA, FAGHE, titled "A Call to Congress: Strengthen Service Coordination for Older Adults."
- John W. Rowe, MD, FGSA, co-authored a November 18, 2021, commentary piece for Route Fifty titled "Nurses can be a key force in helping to bridge gaps in health care access. But many states deny them the ability to practice to their full capabilities."
- On November 24, 2021, Jacqueline L. Angel, PhD, FGSA, and Fernando M. Torres-Gil, PhD, FGSA co-authored an op-ed for The Hill titled "We need to better prepare for an aging America."
- Teresa Ghilarducci, PhD, was quoted in Barrons in a November 26, 2021, article titled "America's Retirement System Is Broken. How to Fix It."
- On November 28, a CBS special titled "Forever Young: Searching for the Fountain of Youth" featured appearances by Steve Austad, FGSA, Nir Barzilai, MD, Morgan Levine, PhD, and Thomas Perls, MD, FGSA.
- William Haley, PhD, FGSA, FAGHE, and Erin E. Emery-Tiburcio, PhD, FGSA, were quoted in a November 30, 2021, Next Avenue article titled "What Is a Geropsychologist and Why Are There So Few of Them?"
- On December 1, 2021, a BBC.com article titled "Family estrangement: Why adults are cutting off their parents" featured quotes from Karl Pillemer, PhD, FGSA.

Demiris, Lin, Sanford, Swenor Named to National Academies Forum

The National Academies of Sciences, Engineering, and Medicine has appointed George Demiris, PhD, FGSA, Frank Link, MD, PhD, Jon A. Sanford, MArch, FGSA, and Bonnielin Swenor, PhD, MPH, to its Forum on Aging, Disability, and Independence. This body, which counts many other GSA members among its membership, fosters dialogue and addresses issues of mutual interest and concern related to aging and disability.

Demiris is a PIK (Penn Integrates Knowledge) University Professor at the University of Pennsylvania and holds joint faculty appointments in the Department of Biobehavioral Health Sciences of the School of Nursing and the Informatics Division of the Department of Biostatistics, Epidemiology and Informatics, Perelman School of Medicine. Lin is the director of the Cochlear Center for Hearing and Public Health and a professor of otolaryngology, medicine, mental health, and epidemiology at Johns Hopkins University. Sanford is a professor in the School of Industrial Design at Georgia Tech. Swenor is an associate professor at The Johns Hopkins Wilmer Eye Institute and the Department of Epidemiology at the Johns Hopkins Bloomberg School of Public Health.

GSA Members Provide Senate Testimony on Disasters

First, let me take this opportunity to wish the GSA family a healthy and happy new year. Part of what has kept me inspired to advocate for policy changes and funding increases during the difficult times of the pandemic and social unrest has been the unwavering commitment to science and innovation among our GSA members. Thank you.

Although we do not have closure on the Build Back Better (BBB) Act and many other important legislative initiatives for older adults, we can be proud of the input that our members and others in the broader aging community have provided to policymakers, and we are not giving up!

So, let me start the column with a short update on the BBB. Senator Joe Manchin (D-WV) has forced the Senate to push the pause button on bringing the bill to the floor. He continues to argue that it is too expensive and dangerous to create new social programs that people will grow to depend upon for decades to come. The senator has also been angered by the pressure that both his colleagues and special interests have used to persuade him to support the bill, particularly with his constituents back in West Virginia. So, back to the drawing board: will he support something closer the \$1.5 trillion price tag he himself has mentioned? What parts of the bill must be removed (e.g., family and medical paid leave) for him to get on board with this major pillar of President Joe Biden's agenda? We will see in the weeks ahead.

Hearing Showcases Members' Expertise



Bell



Spurlock

I like to tout the accomplishments of GSA members and I am particularly fond of sharing news about opportunities they have secured to testify before congressional committees. Yes, hearings can be forums to secure publicity — sometimes using

Hollywood stars — for members of Congress and their pet issues, but they are also opportunities to flesh out policy proposals and discuss options for action by the Congress and Administration.

GSA has its own stars in every aspect of aging research, training, practice, and policy, and recently two of them were asked to testify by Chairman Bob Casey (D-PA) and Ranking Member Tim Scott (R-SC) before the Senate Special Committee on Aging on November 18. (This is probably the most bipartisan committee in Congress.)

The hearing was titled “Inclusive Disaster Management: Improving Preparedness, Response, and Recovery.” Here is the [link to the hearing](#), which includes all the written statements and testimony and the hearing video.

GSA member Sue Anne Bell, PhD, FNP-BC, was the lead-off witness. She is an assistant professor at the Institute for Healthcare Policy and Innovation at the University of Michigan with a knowledge base in disaster preparedness, health disparities, acute

and emergency care, community resilience, and aging. Bell is also a nurse scientist and family nurse practitioner who is often deployed to disasters. Her research focuses on the long-term impact of disasters on health, developing policy that protects and promotes health throughout the disaster management cycle, and in the relationship between community resilience, health disparities and disasters.

She recently was a co-author of a National Academies of Science, Engineering and Medicine report on improving data collection and research methods to more accurately understand the health and mortality consequences associated with large-scale disasters, which was titled “[A Framework for Assessing Mortality and Morbidity After Large-Scale Disasters](#).” We also appreciate her for serving on GSA's COVID-19 Task Force.

GSA member Wanda Raby Spurlock, RN, GERO-BC, PMH-BC, CNE, FNGNA, ANEF, FAAN, was the second witness at the hearing. She is a professor of nursing at Southern University and A&M College in Baton Rouge, Louisiana. The Southern University School of Nursing is one of the largest producers of African American nurses in the nation and is a leader in preparing its graduates to fulfill the demands for a culturally diverse workforce. Spurlock lives in the eye of the storm when it comes to disasters and has become a go-to expert on various aspects of disaster preparedness and the unique ravages faced by older adults and individuals with disabilities when disaster hits.

Spurlock recently served as co-chair of a National Policy Expert Round Table on Emergency Preparedness for Older Adults. This was a partnership between the American Red Cross and the American Academy of Nursing that led to a paper titled “[Closing the Gaps: Disaster Preparedness, Response and Recovery for Older Adults](#).” The report was also endorsed by GSA, the International Federation on Aging, The John A. Hartford Foundation, and the American Geriatrics Society. She was also recently recognized as a Distinguished Gerontological Nurse Educator by the National Hartford Center for Gerontological Nursing.

Thus, you can see what a GSA tour de force we had at this Senate hearing. (I would like to note that GSA's previous board chair, the late Kathryn Hyer, MPP, PhD, FGSA, FAGHE, was also part of the disaster preparedness discussion back in September of 2017, when the same committee held a hearing entitled “[Disaster Preparedness and Response: The Special Needs of Older Americans](#).”)

The crux of the November hearing came out when Bell described the goal of her research: “to understand how communities and the healthcare systems within them can better support their aging residents through the phases of a disaster” in order to improve on how we mitigate, prepare for, respond to, and recover from disasters, which both witnesses argue is not inclusive enough or equitable.

Bell painted a picture full of factors that contribute to negative outcomes for older and disabled individuals when a disaster hits. Older adults and people with disabilities remain disproportionately

affected by disasters in part because disruptions in access to health care and supports and services are especially harmful and not properly addressed in current disaster management. She pointed out the need for strategies to promote aging in place throughout the phases of a disaster to ensure continuity of care which is so critical to older and disabled persons and those with serious illnesses, such as cancer. I found another interesting aspect of disaster preparedness related to the challenges that individuals who depend upon electrically powered medical devices face.

Spurlock was an excellent witness for many reasons including the fact that she lives in the region of the county so often affected by weather disasters. In addition to their stationary in-house clinic, Spurlock and her institution have engaged a fully equipped 40-foot-long mobile health clinic, named “the Jag Mobile” (after the university’s Jaguar mascot) to address the needs of the community. This has provided them with helpful information on the challenges that older adults have “with their greater prevalence of chronic health conditions, multimorbidity, cognitive impairment and medication concerns during disasters.”

Again, she has also found the issue of dependency on assistive devices (walkers, wheelchairs, eyeglasses, glucometers), other supplies, prescriptions, and services something that remain to be properly addressed though current protocols. Psychological distress and social isolation have also been identified as key concerns for older and disabled individuals. Spurlock also spoke to the committee about the need for better preparation for caregivers.

“The one lesson that we have all learned through the many disasters that have occurred is that populations are not equally impacted by a disaster,” she said. “Nearly half of the deaths resulting from hurricane Katrina occurred among older adults. Similarly, in 2012, as reported by the New York Times, approximately half of those who died following Hurricane Sandy were age 65 or older. It has also been noted by the National Council on Disabilities that persons with disabilities, especially those living in poverty were disproportionately left behind in hurricane Katrina.”

Both Bell and Spurlock argued that older adults and people with disabilities are key stakeholders who must be the central focus in inclusive disaster management. They both have seen the need to ensure that continuity of community-based supports and services must be a priority throughout the disaster and that better planning is needed to succeed.

And yes, more research, data collection, and evidence-based strategies are needed. They also showed support for BBB and its home- and community-based services, which could help ensure that older and disabled people could access needed services in a disaster environment. Both talked about the value of the whole community being involved — strengthening relationships between key players in the disaster space and the aging and social services space to ensure inclusion. As Bell pointed out, much of the care provided is not for the immediate medical emergencies, but for the more basic yet significant chronic care needs of older adults in the days and weeks following the disaster.

Both Bell and Spurlock are firsthand witnesses to disaster sites and

have provided care and collected data in various disasters around the country. All in all, this duo had the substance, presentation skills, and agility to be witnesses before a U.S. Senate committee. They successfully shared their evidence, innovations, ideas, and recommendations and came across as thoughtful experts. They also used their personal experiences and storytelling to highlight the human side to the issue.

I was impressed with the ability of Bell and Spurlock to answer the senators’ questions and the preparation that must have been involved based on their understanding of several legislative initiatives (bills) that they both endorsed. I am looking forward to the GSA congressional witnesses of 2022!

Recent Policy Actions

GSA member [Lindsay Peterson](#) represented GSA at a focus group discussion in support of a study that [Healthcare Ready](#) is working on under the Pandemic and All-Hazards Preparedness and Advancing Innovation Act of 2019. The purpose of this discussion was to collect information and insight on preparedness and response initiatives and needs from stakeholders who work with or advocate for older adult and assisted living populations. Peterson recently published a paper discussing preparing for and managing disasters in nursing homes and assisted living communities, “[You Just Forge Ahead: The Continuing Challenges of Disaster Preparedness and Response in Long-Term Care](#),” in *Innovation in Aging*.

GSA signed on to a series of letters from coalitions to support provisions in the Build Back Better Act, including paid family and medical leave, home and community based services supports, Medicare coverage of hearing services and hearing aids, and support first dollar coverage of adult vaccines recommended by the ACIP under Medicare Part D.

GSA Invites Policy Intern Applications

GSA is seeking internship candidates to participate in six week, in-person experiences in Washington, DC. Over the summer, interns will be immersed in aging-related policy development and participate in this process at the national level. GSA is home to three summer policy internships for emerging scholars interested in this professional development opportunity. Internship duties and opportunities include attending congressional hearings; researching and analyzing issues that impact older people; meeting with federal regulatory agencies and national coalitions; monitoring legislation and regulations; contributing to GSA’s *Public Policy & Aging Report*; developing policy sessions for the GSA Annual Scientific Meeting; drafting communications related to these issues impacting older people; and attending networking events with GSA staff. The internship term runs through the summer, with flexible start dates. Each selected candidate will receive a stipend. Two GSA internships are available to candidates from any U.S.-based institution, and a third GSA internship is dedicated to emerging scholars enrolled at Minority Serving Institutions. [Application submissions are due February 7.](#)

Continued from page 1 - New GSA President Shares Outlook for 2022

Whitfield and Roland Thorpe led a dedicated group in providing a GSA-wide diversity, equity, and inclusion (DEI) statement, and recommending several steps for GSA to assess its DEI activities with regard to the GSA staff and the GSA membership. The GSA journal editors and section leaders also provided great leadership and activity in this area. This work will continue to be a priority throughout our sections, committees and GSA members will continue to be leaders in research on older diverse populations, which leads to the second emphasis of this year's theme.

“Enriching our Discovery.” From research on how to best care for the frailest older adults and those who give care to them, to discoveries that aim to transform the biological experience of aging, GSA continues to promote the highest quality research in our journals and in our members. There will undoubtedly be new discovery regarding the many impacts the COVID-19 pandemic has brought about. Our annual conference serves as a wonderful medium to present research, solicit feedback and enrich interdisciplinary research in aging. The perceptions of older people during the COVID-19 pandemic have largely not been flattering, and this inspired the third emphasis of this year's theme.

“Reimagining Aging.” For all of us, at all ages, we seek meaningful lives as we age — the vision of our Society. This requires all of us to understand that each phase of life comes with opportunities and challenges, and to re-imagine our lives and push away any stigmas and instead think of possibilities. GSA and other partner organizations were just beginning a new phase of the Reframing Aging Initiative when the COVID-19 pandemic swept across the world. Nearly two years later the need for reframing and reimagining aging is more apparent than ever. GSA will continue to expand its Reframing Aging Initiative and our members will continue to identify other ways to reimagine aging — from the cells to society, and to embracing the opportunities and challenges of growing older in our society.

Begin to plan your conference submissions and to imagine our reunion celebration at an in-person GSA Annual Scientific Meeting in November. I look forward to a lively and rich conference.

Peter A. Lichtenberg, PhD, ABPP, FGSA, is the director of the Institute of Gerontology (1999 to present) and a Distinguished Professor of Psychology at Wayne State University. A clinician, researcher, faculty member, and administrator throughout his career, his professional roles underscore his commitment to growing gerontology programs and promoting environments for colleagues and students to flourish. He also continues to have a private practice as a clinical geropsychologist and finds his work with older adults inspiring.

At Wayne State he helped create and lead the Lifespan Cognitive Neuroscience research program, a pre-doctoral training program in urban aging and health, and for 23 years has co-directed Michigan's Urban African American Aging Center funded by the National Institute on Aging. He created an ongoing, award-winning, community engagement program, and recently he led the creation of the Institute of Gerontology's first endowment campaign, which now stands at \$2.25 million.

Lichtenberg received his BA degree from Washington University (St. Louis) and master's and doctorate degrees in clinical psychology, with a concentration in aging, from Purdue. Throughout his career, his clinical and research work focused on the intersection of geriatric medical rehabilitation, dementia assessment, late life depression, financial decision-making and financial exploitation. The author of several assessment instruments, he has authored 200 peer reviewed publications, and written and edited seven books. As a member of GSA since 1988, he highly values his many leadership roles within the organization.



Continued from page 1 - Nutritional Components May Promote Healthy Aging

proteins that are components of the respiratory chain and can develop mutations as a result of oxidative stress.

Declines in mitochondrial function and metabolism are among the key components of AACD. Evidence suggests that changes associated with AACD act as triggers for age-associated diseases and conditions.

“Because abnormalities in the function of mitochondria are associated with many diseases, including cancer, cardiovascular diseases, and neurodegenerative diseases, drivers of mitochondrial dysfunction are promising targets for addressing multiple age-related conditions,” said Roger A. Fielding, PhD, FGSA, a member of the newsletter's content development faculty who is associate director of the Jean Mayer USDA Human Nutrition Research Center on Aging and professor of medicine at the Tufts University School of Medicine.

Adoption of healthful eating patterns and exercise has been shown to improve markers of age-associated diseases and attenuate biological aging.

“Calorie restriction appears to improve markers of disease risk in humans, but its acceptability and feasibility particularly over the long term remains a challenge,” said LeBrasseur. “Dietary supplementation with nutritional components that target specific mechanisms associated with AACD may be an alternative or complementary

approach to lifestyle interventions targeting AACD.”

Further, identifying AACD risk factors and intervening with cellular nutrients earlier in the aging process, before major mobility disabilities and disease-driven limitations emerge, could help improve overall healthy aging.

Emerging research indicates that some nutritional compounds can support healthy aging by influencing mitochondrial repair and preservation, quality control, and signaling. Examples of emerging compounds that have been shown to address mitochondrial damage and clinical disease states include SS peptides, coenzyme Q10 (CoQ10), MitoQ, and glycine and *N*-acetylcysteine (GlyNAC). Compounds that may address mitochondrial quality control include sirtuins, mitochondrial division inhibitor (mdivi), urolithin A, and epicatechin. Finally, nutritional compounds that have been shown to address mitochondrial signaling include nicotinamide riboside and nicotinamide mononucleotide. Dietary supplementation with these components may be an alternative approach to lifestyle interventions targeting AACD, although more research is needed before making definitive recommendations.

Support for this issue of *What's Hot* was provided by Nestlé Health Science.

Morgan, as Vice Chair-Elect, Highlights Many Paths to Engagement within ESPO

I am thrilled and honored to be joining ESPO leadership in 2022 as vice chair-elect. I am a fourth-year doctoral student at the University of Pennsylvania School of Nursing exploring inner strength in persons newly diagnosed with mild cognitive impairment along with their care partners. In addition to my research, I am a gerontological and palliative care Nurse Practitioner with nearly a decade of nursing experience.



Morgan

If you're new to the GSA leadership structure like me, I'll provide you with a brief overview. As ESPO section officers, we begin our service as vice chair-elect and then rotate through leadership ranks (vice chair, chair, and past chair) over a four-year period. This structure provides us with the unique opportunity to learn from those who came before us, ensure continuity, and allow ample opportunity to impact change over time.

I joined GSA in 2013, when I presented a poster at the Annual Scientific Meeting in New Orleans as a new-to-practice nurse. I was interested in aging research and practice at the time, but still very early in my clinical, professional, and academic career. I didn't know quite where I fit in the grand scheme of GSA or even how to get involved. Since then, through mentorship, peer support, and volunteering, I have learned the value of and benefitted hugely from engagement with GSA.

As vice chair-elect, I seek to make space to engage with individuals who are beginning to consider a career in aging as well as provide resources and opportunities to launch those who are more established into long-lasting, successful careers in aging. As a clinician and member of the Health Sciences Section, I hope to link clinical knowledge with research to improve care for persons living along the spectrum of health and illness through interdisciplinary collaboration. Finally, I strive to represent the diversity of experiences of GSA members through engagement and facilitation.

Most importantly, I am looking forward to the opportunity to take this first year to listen and learn from those around me. I hope to learn from the work and experience of my fellow leaders — Vice

Chair Dr. Kalisha Bonds Johnson, Chair Dr. Danielle Waldron, and Past Chair Dr. Darina Petrovsky.

I can already see how valuable their leadership has been in the number of enhanced and new programs available to ESPO members. For example, this team has been instrumental in launching the [GSA on Aging](#) podcast and creating a series of timely webinars, such as "[Addressing Issues of Diversity, Equity, and Inclusion on the Job Market.](#)"

I also hope to hear from my fellow ESPO members about what they need from GSA. In my past role as ESPO junior leader with the Health Sciences Section, my co-lead, An Ngyuen, and I completed an engagement survey of Health Sciences members who were also ESPO members. We found that many members wanted to be engaged with GSA through their sections, but often didn't know how. This sentiment was echoed in the ESPO networking meeting at the Annual Scientific Meeting.

I wanted to share a few key takeaways from these sessions for how you can get engaged with GSA. First, make sure that you use the [GSA website](#). The [Membership](#) tab offers an overview of the many features available to members, such as member groups, interest groups, and awards. Specifically, the [ESPO Member Group](#) page has lots of information about the ESPO-specific resources. For example, the [Dissertation and Pre-Proposal Writing Groups](#) are facilitated and structured writing groups that will help you move your doctoral work forward. I also encourage you to stay up to date by checking out [GSA Connect](#), where you can join any of the nearly 60 interest groups and up to two of the six member groups, see discussion boards, and manage e-mail announcements.

Finally, consider [volunteering!](#) It wasn't until I started volunteering with GSA that I truly started to realize the benefits of my membership. Through various volunteer positions, I have met so many phenomenal scholars – both early career and established leaders in the field.

As Board Chair Dr. Terri Harvath reflected when she addressed ESPO members at the recent GSA business meeting, GSA has become my academic home. I hope it can be the same for you!

2021 awardee

The following awardee was selected and honored at the GSA 2021 Annual Scientific Meeting Online. The Society salutes the outstanding researcher below for contributions to gerontology and thanks the selection panel for their time and efforts in choosing the recipient.

Social Research, Policy, and Practice Section



SRPP Outstanding Student Poster Award

Xiao Qiu, MGS
 Miami University

For information on GSA's awards, visit www.geron.org/membership/awards

educational news

(Re)introducing the “Gerontology and Geriatrics Curricular Standards and Guidelines in Higher Education”

By Tamar Shovali, PhD, Eckerd College (shovalte@eckerd.edu) and Marilyn Gugliucci, MA, PhD, FAGHE, FGSA, University of New England College of Osteopathic Medicine (mgugliucci@une.edu)

The seventh edition of the AGHE “Gerontology and Geriatrics Curricular Standards and Guidelines in Higher Education” will be digitally available soon (if not already by the time you read this)! In this edition, we respond to the evolution of the field of aging demanding increased breadth and depth of content in both gerontology and geriatrics education. Through AGHE’s leadership, gerontology education is now competency-based, as have been the health professions programs.

All chapters in this edition have been comprehensively rewritten to include the standards and guidelines for competency-based education (CBE). This publication offers tools to identify and implement CBE in programs and to develop students’ skills and

abilities needed in our workforce. This document is an integral resource for colleges and universities, including technical schools and community colleges, nationally and internationally.

Program directors and coordinators, faculty, deans, and administrative leadership at educational institutions will find these guidelines essential when implementing and revising programs in liberal arts, the sciences, and health professions education. The curricular standards and guidelines also serve to guide existing programs through academic or institutional reviews for Program of Merit, providing matrices for mapping health professions and gerontology competency-based education and documentation.

Look for forthcoming announcements in the coming months about how to obtain a copy of this essential document.

funding opportunities

Glenn Foundation, AFAR Teams for Postdoctoral Fellowship in Basic Biology of Aging

The Glenn Foundation for Medical Research, in partnership with the American Federation for Aging Research (AFAR), created the [Glenn Foundation for Medical Research Postdoctoral Fellowships in Aging Research](#) to encourage and further the careers of postdoctoral fellows who are conducting research in the basic biology of aging, as well as translating advances in basic research from the laboratory to the clinic. The award is intended to provide significant research and training support to permit these postdoctoral fellows to become established in the field of aging.

The Glenn Foundation Postdoctoral Fellowship program supports research projects concerned with understanding the basic mechanisms of aging as well as projects that have direct relevance to human aging if they show the potential to lead to clinically relevant strategies that address human aging and healthspan. Projects investigating age-related diseases will be considered, but only if approached from the point of view of how basic aging processes may lead to these outcomes. Projects concerning mechanisms underlying common geriatric functional disorders such as frailty will also be considered. Projects that are strictly clinical in nature such as the diagnosis and treatment of disease, health outcomes, or the social context of aging are not eligible.

It is anticipated that up to 10 one-year grants will be awarded in 2022. Recipients of this award are expected to attend the AFAR Grantee Conference; funds will be allocated from the grant for this purpose. The goal of the meeting is to promote scientific and

personal exchanges among recent AFAR grantees and experts in aging research. Letters of intent are due January 25, 2022.

BIG Grants Will Support Transformative Discoveries in Biology of Aging

Sponsored by the Glenn Foundation for Medical Research, in collaboration with the American Federation for Aging Research (AFAR), the “[Breakthroughs in Gerontology \(BIG\)](#)” initiative provides support to a small number of research projects which if successful offer significant promise of yielding transformative discoveries in the fundamental biology of aging. Proposals that build on early-stage fundamental aging research to establish potential approaches for clinically relevant strategies, treatments, and therapeutics to address human aging and healthspan are also encouraged.

Projects that focus on specific diseases or on assessment of health care strategies will receive lower priority, unless the research plan makes clear and direct connections to fundamental issues in the biology of aging and/or on the translational aspects of basic discovery to human aging and healthspan.

Letters of intent are due January 25, 2022. Two three-year awards will be made in 2022, at the level of \$300,000 total (\$100,000 per year). The amount and the duration of the award may be modified if during the review process or at the funding stage it is evident that such modifications would better serve the objectives of the program. Recipients of this award are expected to attend the AFAR Grantee Conference. The purpose of the meeting is to promote scientific and personal exchanges among recent AFAR grantees and experts in aging research.

GSA's Journals Unite to Accelerate New DEI Guidance

The editorial leadership of GSA's journals published a new editorial, "GSA Journal Commitment to Inclusion, Equity, and Diversity: Editors Announce New Guidance," jointly appearing in the current issue of all of GSA's journals, that offers guidance to all authors and reviewers moving forward — while also pledging to nurture the growth and recognition of scholars from groups that have been underrepresented in the journals.

This piece was authored by all GSA editors-in-chief: Suzanne Meeks, PhD, FGSA (*The Gerontologist*), Steven M. Albert, PhD, MS, FGSA (*Innovation in Aging*), Rozalyn Anderson, PhD, FGSA (Biological Sciences section of *The Journals of Gerontology, Series A*), Judith L. Howe, PhD, FGSA (*Gerontology & Geriatrics Education*), Derek M. Isaacowitz, PhD, FGSA (Psychological Sciences section of *The Journals of Gerontology, Series B*), Brian Kaskie, PhD, FGSA (*Public Policy & Aging Report*), Jessica A. Kelley, PhD, FGSA (Social Sciences section of *The Journals of Gerontology, Series B*), David G. Le Couteur, MBBS, PhD (Biological Sciences section of *The Journals of Gerontology, Series A*), and Lewis A. Lipsitz, MD, FGSA (Medical Sciences section of *The Journals of Gerontology, Series A*).

- [The Gerontologist, Volume 61, Issue 8, December 2021, Pages 1181–1183](#)
- [The Journals of Gerontology, Series A: Biological Sciences & Medical Sciences, Volume 76, Issue 12, December 2021, Pages 2167–2168](#)
- [The Journals of Gerontology, Series B: Psychological Sciences & Social Sciences, Volume 76, Issue 10, December 2021, Pages 1923–1925](#)
- [Public Policy & Aging Report](#)
- [Innovation in Aging, Volume 5, Issue 4, 2021](#)
- [Gerontology & Geriatrics Education, Volume 42, Issue 4, 2021, Pages: 455–458](#)

Recognizing that inequity and bias have become ingrained from the societal level down to even the operations of such journals themselves, the editors "therefore commit to encouraging cutting-edge, conceptually driven work that addresses and aims to overcome inequity in health, mental health, social status, and justice in late life, particularly those well-documented inequities arising from age, socioeconomic status, racial, ethnic, sex, and gender bias and discrimination, geography, and intersections among them. We further commit to building and maintaining diverse author, reviewer, and editorial cohorts that will nurture this scholarship in the years to come."

The guidelines described in the editorial will be implemented in the instructions to authors and reviewer checklists of the journals in early 2022. Each journal will adopt additional approaches as needed. For example, the Medical Sciences section of *The Journals of Gerontology, Series A* outlines steps it will be taking in [a separate editorial](#) co-authored by Lipsitz, Roland J. Thorpe, Jr, PhD, FGSA, and Michelle C. Odden, PhD, FGSA. Be on the lookout for a GSA webinar on this *Series A* program in early 2022.

Series A Welcomes Submissions Related to Technology and Fall Prevention

The Medical Sciences section of *The Journals of Gerontology, Series A: Biological Sciences and Medical Sciences* is announcing a special issue to be titled "[Novel Technology-Driven Approaches to Enhance Mobility and Reduce Falls in Older Adults](#)."

Gait and balance impairments associated with aging and age-related disease challenge mobility, threaten independence, and heighten the risk of incurring falls and their costly consequences. Advances in the fields of engineering, computing, manufacturing, and human-computer interfaces have enabled the development and/or application of technology-driven strategies to help combat this global health issue.

Brad Manor, PhD, Junhong Zhou, PhD, and On-Yee "Amy" Lo, PhD, have agreed to serve as the guest editors for the special issue. The editors invite investigators to submit primary research papers or review articles; topics that will be considered should have a specific focus on older adults and/or age-related disease and may include, but are not limited to:

- Sensory substitution and sensory augmentation
- Noninvasive brain stimulation
- Robotics
- Rehabilitation technologies, including virtual reality
- Remote prediction and prevention of falls
- Fall-related injury mitigation
- Features and challenges of interaction/adoption of relevant technologies within clinical practice and the older adult population

Manuscripts are due February 15, 2022.

GSA Journal Alerts: Delivered Right to Your Inbox!

Stay up to date on the latest research with content alerts delivered to via email. This free service from Oxford University Press allows you to create custom email alerts to make sure you never miss out on the latest research from your favorite GSA publications. Just follow the steps below:

1. [Register for an Oxford Academic account](#). This will allow you to sign up for email alerts, purchase content, and save searches.
2. Once you've registered, click on your email address in the upper right hand corner.
3. From the drop-down menu, click on "Email Alerts."
4. To register for New Issue Alerts (delivered with each new journal issue), click on "Add Alerts" under "New Issue Alerts." Check the box next to any publication you wish to receive alerts from, and click "Add Alerts."
5. To register for Advance Article Alerts (highlights the newest content weeks before it is included in an issue), click on "Add Alerts" under "Advance Article Alerts." Check the box next to any publication you wish to receive alerts from, and select the frequency you wish to receive them (daily or weekly). Click on "Add Alerts."
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new resources

BSO Now Supports Online Learning for Dementia and Sexuality

The Behavioural Supports Ontario (BSO) Sexual Expression and Dementia Working Group has released the first e-module in its “Dementia and Sexuality” learning program. This free e-module, developed with the support of the Regional Geriatric Program-Central, is available on the [Geriatric Essentials E-Learning website](#) (formerly Frailty E-Learning).

“Dementia and Sexuality: An Introduction” presents four cases scenarios, inviting learners to understand how people living with dementia may express their sexual and intimacy needs. Along with debunking myths and stereotypes about sexuality and aging, this e-module explores practical strategies to support people living with dementia across various settings.

The introductory e-module is the first of a four-part series, each addressing complex themes about the sexual and intimacy needs of people living with dementia.

NAC White Paper Analyzes Existing Impact of Incentives on Caregiver Services

In a new white paper published by the National Alliance for Caregiving (NAC), experts discuss incentives in the existing Medicare

program that could motivate health systems and providers to offer more robust support to family caregivers. The paper specifically identifies barriers that prevent health systems and providers from providing new resources and offers innovative yet realistic solutions to help foster change. Constructed on extensive research and expert insight, NAC’s white paper informs providers, payers, and regulators, like The Centers for Medicare & Medicaid Services, of the opportunities to reduce barriers and increase formal caregiver supports in the Medicare program.

Providing clarification into how specific barriers are currently hindering the expansion of caregiver services nationally, the paper covers both organizational and the systemic level obstacles. The paper discusses significant components that contribute to systemic setbacks, including specifics around variation in payment models, insurance coverages, health care settings and provider types. Additionally, on the organizational level, the paper discusses lack of standards of care, limited awareness of revenue opportunities, and poor accessibility of billing code information. Taken collectively, these qualitative factors present a unique cluster of challenges to caregivers and to those hoping to support them.

The paper is titled “[Caring For The Caregiver: Incentivizing Medical Providers to Include Caregivers as Part of the Treatment Team](#),” and acknowledgments are given to many GSA members.



GSA Fellows Nominations

Fellow status is the highest class of membership within The Gerontological Society of America (GSA).

The awarded status recognizes a member's excellence in a broad scope of activities: research, teaching, administration, public service, practice, and participation within the society.

Nominations open December 15, 2021 and close February 15, 2022.

Find out more about nomination requirements and procedures at [Geron.org/Fellows](#).



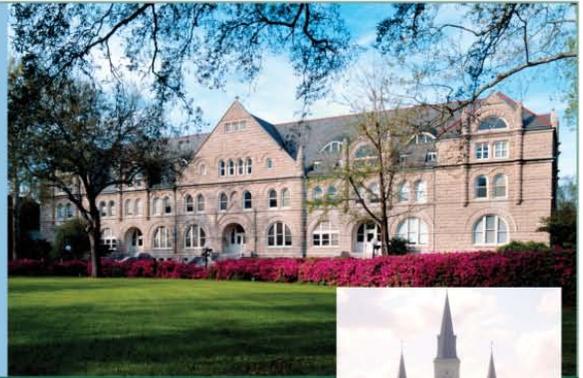
Acknowledging exceptional, ongoing work in the field of gerontology and involvement in GSA activities.



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Center for Aging

New Orleans, Louisiana



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Now accepting applications through March 15, 2022

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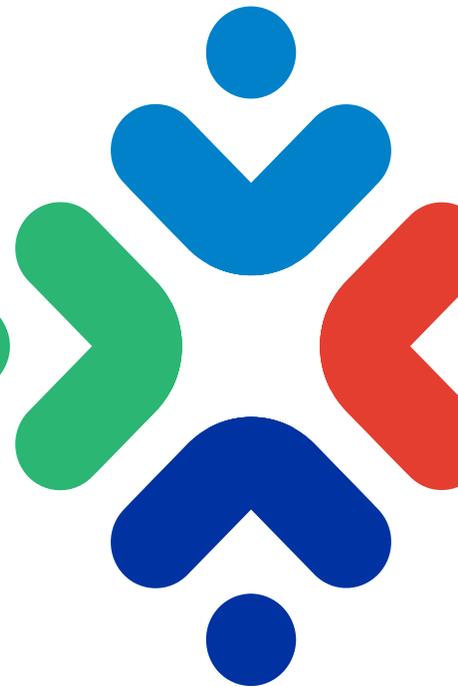
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