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GSA Forms Diversity and Justice Working Group

GSA has created a Diversity and Justice Working Group, whose purpose is to make tangible and actionable recommendations to GSA’s Board of Directors for short-term outcomes to increase diversity and inclusion among the membership of GSA.

As established by GSA President Kathryn Hyer, MPP, PhD, FGSA, FAGHE, this ad hoc committee will review existing and suggest new internal policies and practices that should be implemented — to both improve the organization’s ability to meet the needs of its members and to bolster the contributions the society can make for addressing the needs of older adults.

Fellowships Will Advance Reporters’ Coverage of Aging Issues

GSA has received renewed grant support to welcome a new cohort of reporters for the Journalists in Aging Fellows Program. The 2020 funders to date include The Silver Century Foundation, RRF Foundation for Aging, The John A. Hartford Foundation, and a new partner this year, the Gannett Foundation.

Since its founding in 2010, this program has been responsible for nearly 700 news stories produced by 170 alumni. It has two goals: to educate journalists about issues in aging, better allowing them to spread a new awareness to general-audience, ethnic, and other minority populations; and to disseminate information about new scientific findings, policy debates, innovations, and evidence-based solutions. The new cycle of the program will be conducted entirely online.

“We’re grateful for the continued support of our funding partners, who join us in recognizing the crucial need this year for accurate coverage of every inter-related dimension of aging in America — including physical and mental health, social connections, housing, and financial security, to name a few,” said Todd Kluss, GSA’s director of communications. “We will make the most of available technology to allow the new journalist fellows to build invaluable connections to expert sources on aging, to each other, and to their communities.”

Keith Whitfield, PhD, FGSA, a long-time Society member, will serve as chair.

“I am honored to serve in this capacity,” said Whitfield. “The working group is designed to address an important issue that I have committed my entire 30-year career to working to advance within GSA.”

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From the CEO

That First-Time Feeling
By James Appleby, BSPharm, MPH • jappleby@geron.org

It seems that as we age there are fewer and fewer “first times.” That is, the experience of trying something for the first time seems to occur less frequently than when we were children, teenagers, or young adults. But here in the age of COVID-19, we seem to be experiencing a lot of things — personally and professionally — for the first time.

Do you remember your first time attending a GSA Annual Scientific Meeting and how you navigated its constantly stimulating environment? Or the first time your abstract was accepted and you got to present at a GSA meeting? Or, the first paper you got published in a GSA journal? These were all first times to remember fondly and that led to professional growth.

We’re all about to experience another collective first time, that of participating in the excitement of a GSA Annual Scientific Meeting Online. Like the other first times you’ve experienced, we hope to make this experience one that is rewarding and memorable.

All who attend and present will be pioneers in the spirit of those who made past major GSA milestones possible, including the leaders who formally established GSA 75 years ago to “promote the scientific study of aging.”

It may feel a bit different, but the innovations we adopt today will make a lasting impact and allow science to advance in the face of adversity. Even when we return to in-person conferences, the online meeting structure that we are adapting to is likely to continue in some capacity.

As scientists and researchers, you are used to trying new things and breaking new ground in how you approach problems. This is an opportunity to apply these same traits to how your research results are shared.

During the pandemic, we’ve all learned to be quite agile. The GSA staff and our volunteer leaders have been hard at work over the past two months setting up the framework for the first GSA Annual Scientific Meeting Online. We have been developing processes to ensure a seamless experience for presenters in this largely new format.

Now in September, we need the engagement of accepted presenters to submit their materials — using a new platform — to ensure a quality and robust experience for all attendees. Given that several major aging conferences were cancelled this spring, the demand for access to new research is great.

With everyone’s participation, GSA’s 2020 Annual Scientific Meeting will feature more than 300 symposia, 450 paper presentations, 1,500 posters, and live discussions with every presenter. With travel no longer an impediment to attendance, colleagues from across the U.S. and around the world will be able to easily attend. Think about how far your presentations will reach!

The GSA Annual Scientific Meeting Online will be much more than a virtual recreation of our traditional meeting format. This will be a state-of-the-art online conference where all content is available on demand, with the ability to interact with any presenter either live or asynchronously. You’ll be able to network safely from your home or office.

In the face of COVID-19, pressing forward, digging deeper, and taking steps to share your scholarship is more important than ever. We look forward to helping you advance your careers and advance the field of gerontology through implementation of the Annual Scientific Meeting Online.

James

By James Appleby, BSPharm, MPH • jappleby@geron.org
New Books by Members

- “Adult Development: Growth, Longevity, and Challenges,” Julie Hicks Patrick, PhD, FGSA, Bert Hayslip Jr., PhD, FGSA, FAGHE, and Lisa Hollis-Sawyer, PhD. Published by Sage Publishing, 2020.

Members in the News

- Donna Fedus, MA, was quoted in a May 15 Forbes article titled “Five Ways To Build Age Equity Into The Workplace.”
- On June 20, Paul Nash, PhD, was quoted in The Washington Post in an article titled “Covid-19 deaths reveal ageist perceptions of seniors, which affects the care they receive,” which was based on a June 15 piece he co-authored for The Conversation titled “Coronavirus shows how ageism is harmful to health of older adults.”
- A July 3 Next Avenue article titled “A Pandemic Lockdown Just for Older People? No!” quoted GSA CEO James Appleby, BSPPharm, MPH, Joseph Coughlin, PhD, FGSA, Ruth Finkelstein, DSc, and Nora Super, MPA.
- Jason Karlawish, MD, co-authored a July 13 op-ed in The Washington Post titled “Continued bans on nursing home visitors are unhealthy and unethical.”
- On July 25, Kristine Ajrouch, PhD, FGSA, was quoted in an article in The Arab American News titled “COVID-19, aging, dementia and social bonds; an Arab American perspective.”
- Stephen Golant, PhD, FGSA, was quoted in a July 26 Quartz article titled “COVID-19 will change the way we live as older adults.”

Colleague Connection

This month’s $25 amazon.com gift certificate winner: Tamar E. Shovali, PhD

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

Member Spotlight

GSA’s website features monthly Q&A sessions with distinguished members. The current spotlight shines on: Hsiao-Wen Liao, PhD

New COVID-19 Network Guided by GSA Members

Several GSA members have been appointed to the COVID-19 Rapid Response Network for Nursing Homes, an initiative of the Institute for Healthcare Improvement supported by The John A. Hartford Foundation in partnership with Age-Friendly Health Systems. Alice Bonner, PhD, RN, FAAN, FGSA, and Former GSA President Terry Fulmer, PhD, RN, FAAN, FGSA, are two of the group’s co-chairs. Other members include Ellen Flaherty, PhD, MSN, APRN, GSA President Kathryn Hyer, MPP, PhD, FGSA, FAGHE, Vincent Mor, MED, PhD, MA, FGSA, Jennifer Pettis, MS, RN, CNE, Karl Pillemer, PhD, FGSA, and Robyn I. Stone, DrPH, FGSA.

Wilks Earns Grant to Study COVID-19’s Impact on Alzheimer’s Caregivers

Louisiana State University School of Social Work Professor Scott E. Wilks, PhD, FGSA, has been awarded a grant from the U.S. Department of Health and Human Services’ Health Resources and Services Administration to address the impact of COVID-19 on Louisiana residents who care at home for persons with Alzheimer’s disease and related dementias. Wilks and his multidisciplinary team aim to improve the health and well-being of Louisiana caregivers with utilization of telehealth and in-home, smart device technologies.

Sanders Named to Interim Dean’s Post

Sara Sanders, PhD, MSW, FGSA, has been named the interim dean of The University of Iowa’s College of Liberal Arts and Sciences (CLAS), effective July 30. Sanders has been serving as associate dean for strategic initiatives and director of diversity, equity, and inclusion within CLAS. Her appointment is effective July 30, 2020. She is also a professor in the School of Social Work, served as the undergraduate program director from 2011 to 2015, and as director of the School of Social Work from 2015 to 2019. She also was an administrative fellow in CLAS from 2018 to 2019. Sanders was awarded the Distinguished Professor Award in the School of Social Work four times, the President and Provost Award for Teaching Excellence in 2015, and was named a Dean’s Scholar in 2011.

Antonucci Delivers NIA Matilda White Riley Lecture

On June 8, former GSA President Toni Antonucci, PhD, FGSA, served at the 2020 distinguished lecturer for the 13th National Institutes of Health (NIH) Matilda White Riley Behavioral and Social Sciences Honors. Antonucci is the Elizabeth M. Douvan Collegiate Professor of Psychology and program director and research professor in the Life Course Development Program at the Institute for Social Research at the University of Michigan. Her research has improved understanding of how social relations and networks impact health across the lifespan and particularly how social relations influence one’s ability to manage life’s challenges.

Whitfield Named as New UNLV President

On July 23, the Nevada System of Higher Education Board of Regents voted to appoint Keith Whitfield, PhD, FGSA, as the new president of the University of Nevada, Las Vegas (UNLV). As of August 24, he is UNLV’s 11th permanent president and the first Black president in the university’s 63-year history. Whitfield was most recently the provost and senior vice president of academic affairs and a professor of psychology at Wayne State University. Previously, he was vice provost for academic affairs at Duke University and held appointments as professor in the Department of Psychology and Neuroscience, research professor in the Department of Geriatric Medicine at Duke University Medical Center, and senior fellow at the Center for the Study of Aging and Human Development. He also was the co-director of the Center on Biobehavioral Health Disparities Research.
Policy Series Preview:
Sessions as Strong as Ever, Including Focus on Elections

There are few things in life these days that are as they used to be. I’m reminded of this as I sit in my home office (aka living room) preparing my regularly scheduled column about GSA’s Annual Scientific Meeting Policy Series.

Although we won’t be meeting in person in Philadelphia as originally planned, I am excited about the Annual Scientific Meeting Online and our policy sessions! The conference starts the day after the presidential election, and the policy world — well, everyone — will be abuzz with the results. The Policy Series is developed by the Public Policy Advisory Panel in conjunction with GSA Vice President of Professional Affairs Patricia M. “Trish” D’Antonio and me.

I have a great time each year serving as moderator and/or presenter in these sessions, and have been well-rewarded with good attendance, excellent discussions, and appreciative comments. We will still do as much of the “usual” as possible, and we are pleased to announce that a few of our Policy Series symposia will be converted to webinars that will — in my mind — keep the meeting going through the fall and into next year.

The core elements of the Policy Series will all be continued, with the opportunity for a much larger audience to participate. We encourage you to invite your colleagues. As with all of the GSA meeting’s sessions, you will be able to view the presentations on demand and participate in live discussions with presenters. Continue to monitor the GSA Annual Scientific Meeting Online web page for more information. Watch for these sessions as part of the Policy Series:

**The Impact of Ageism on Health and Efforts to Address It Through Reframing Aging**
Chair: Erica Solway
Panelists: Julie Ober Allen, Erica Solway, Patricia M. D’Antonio

This symposium will highlight recent research from the University of Michigan National Poll on Healthy Aging on self-reported experiences of everyday ageism among a nationally representative sample of U.S. adults age 50 to 80 and its connections to physical and mental health outcomes. A researcher also using data from the National Poll on Healthy Aging will explore the prevalence of positive attributes of aging, its relationships to health, and ways in which it may buffer older adults from the adverse health consequences of ageism. Then speakers will highlight the Reframing Aging Initiative and the ways in which GSA and other organizations are leading a national effort to address ageism through education and dissemination of research-based resources.

This session will feature research, education, and advocacy efforts and will focus on the policy implications of efforts to better understand the prevalence of and strategies to counter the effects of ageism.

**The Role of a Stakeholder Member Group in Shaping Geriatric Policy: The National Association for Geriatric Education**
Chair: Leland Waters
Panelists: Leland Waters, Anna C. Faul, Catherine Carrico, Marla Berg-Weger
Discussant: Brian W. Lindberg

This symposium will first describe how geriatric educators inform policy and provide a historical perspective of how the National Association for Geriatric Education has influenced aging policy is provided. Recent efforts to increase funding for geriatric education will be shared, followed by future directions in policymaking.

**The Older Americans Act Reauthorization: Major Successes and Shortcomings**
Chair: Brian Lindberg
Panelists: Amy E. Gotwals, Damon Terzaghi, Andrew MacPherson, Nicole Burda

This session provides an update on the 2020 Older Americans Act (OAA) reauthorization process and passage of the new law, Supporting Older Americans Act of 2020 (P.L.116-131). Presenters will provide insights on both the content of the new law and the process that led to the bicameral, bipartisan legislation. Speakers will include the aging network and other stakeholders, who will discuss key changes to the Act and how they may be implemented over the next five years.

**The Elder Justice Act, Nursing Home Reform, and Funding Legislation**
Chair: Brian Lindberg
Panelists: Evelyn Fortier, Bob Blancato, Lori Smetanka

This session will provide updates on major federal efforts to address elder abuse, neglect, and exploitation, including strategies for prevention, intervention, services, and prosecution. Congress has been working on both reauthorizing the Elder Justice Act and policies to address long-term care facility quality issues, and this panel will provide an update on those efforts and what lies ahead.

**Illuminating the Intersection Between Employers and Experienced Employees: Current Research & Policy Directions**
Chair: Brian Kaskie
Panelists: Phyllis Moen, Kevin Cahill, Patrick Button, Cort Rudolph, Robert Clark

This symposium presents the latest research concerning: age discrimination in the workplace, intergenerational workplace arrangements, work ability and performance, and the increasingly varied pathways older persons are taking from work to retirement. We also examine how employers have addressed these issues, and consider why one type of employer may be more likely to adopt
and implement a policy or program supporting older workers. Panelists then discuss policy alternatives that may increase and expand current employer efforts to support experienced employees.

**Building Momentum for a New Future in Politics and Aging: Examining Economics, Values, Language, and Care**

Chair: Michael J. Lepore
Panelists: Nora M. Super, Judith G. Gonyea, Jacqueline Chattopadhyah, Patricia M. D’Antonio
Discussant: Jean Accius

This session examines major contemporary trends at the intersection of politics and aging in the U.S. Papers address the economics and demographics of aging, drawing attention to increasing federal spending on older adults, decreasing availability of caregivers, and geographic clustering of older people; changes in the age of the electorate, intergenerational political values, and the growing politically polarization of American society; the tendency for federal initiatives to fail to support caregivers, for reasons of policy history, policy traits, and mass public features, like the political isolation of informal caregivers; and the role of linguistic and metaphorical practices in shaping our experiences and views of aging. The discussion will addresses opportunities for the country to become more age-friendly while also sustaining democratic institutions and national unity.

**Congressional Update**

Chair: Brian W. Lindberg
Panelists: Congressional Staff/TBD

This popular annual session will provide cutting-edge information on what the 116th Congress has and has not accomplished to date, and what may be left for the lame duck session to address. Speakers will discuss key issues such as the COVID-19 response, Social Security, Medicare, Medicaid, geriatric education, and the Older Americans Act. Predictions for the 117th Congress will abound.

**Interdisciplinary Public Policy Discussion Session**

Chair: Brian W. Lindberg
Panelists (representatives of GSA sections): Robert Harootyan, Matt Kaeberlein, Eileen Crimmins, George Kuchel, Dana Bradley, Darina Petrovsky
Discussant: Linda K. Harootyan

This interactive session is an interdisciplinary look at policy issues in aging with the speakers representing views from their sections. This session, organized by the GSA Public Policy Committee, will provide both GSA section leadership and attendees an opportunity to have an open dialogue on important public policy issues of significance in the field of aging.

**Connecting Aging Research to Policy: Insights and Strategies for Early Career Researchers**

Chair: Claire Pendergrast
Co-Chair: Jennifer May
Panelists: Lori Martin Plank, Pamela Herd, Haley B. Gallo, Erica Solway, Kali S. Thomas

Panelists will discuss opportunities for researchers to contribute their expertise to policy discussions and will share their own experiences and perspectives on participating in the policy process. Specific topics covered will include aging policy internship opportunities for graduate students, academic involvement with advocacy efforts to promote healthcare access to older adults, strategies for designing and conducting impactful and policy research, approaches to collaboration with diverse stakeholders to connect research to policy, and strategies for communicating policy-relevant research findings to general public and policy audiences.

This symposium will reflect the GSA Social Research, Policy, and Practice Section’s strong commitment to connecting research to policy and practice and will provide early career scholars with strategies to connect their own research to policy in order to inform decision-making and improve health and quality of life for older adults.

Watch for a Policy Series email to show up in your e-mail inbox sometime before the GSA meeting. This November we won’t be able to enjoy each other’s company in person (or visit Philadelphia treasures like Jim’s Steaks or the Barnes Foundation). But we will, as we do each year, have the opportunity to share in the amazing work of our colleagues and see that GSA and its members continue to lead the way in the scientific study, practice, and education that is essential to improve the quality of life for older adults here and around the world. So, see you online in November and next year in Phoenix!
Grants Will Support Chronic Pain Research

Pfizer Inc. and Eli Lilly and Company have issued a call for proposals for the third Global Awards for Advancing Chronic Pain Research (ADVANCE), an independently-reviewed competitive grants program. Areas of research that are considered in-scope for an ADVANCE research grant, with the condition of interest being osteoarthritis (OA) and chronic pain associated with OA, will include studies that aim to advance the understanding of the following:

• Evaluation of unmet medical needs in pain management associated with OA as follows:
  • Benefit-risk assessment and patient preference in the choice of pain medication for patients with comorbid conditions (e.g., cardiovascular disease or history of substance abuse)
  • How risks associated with long-term use of analgesics are assessed currently
  • Treatment of chronic pain in special populations (e.g., postsurgical, older adults)
  • Evaluation of multi-disciplinary approaches to management of OA (e.g., physical therapy, cognitive behavioral therapy) and their combination with pharmacological treatment
  • Understand and predict response to treatment, disease state, and course of OA (normal and rapid trajectories)
  • Approaches to improving adherence to therapy or therapeutic regimes for pain associated with OA
  • Use of patient characteristics such as biomarkers or other objective evaluations (e.g., quantitative sensory testing, imaging modalities) in the assessment and management of OA to better understand disease course
  • Evaluation of improved function
  • How changes of physical function are assessed in clinical practice in patients with OA, and how current physical function assessment could be improved
  • How individual goal setting can contribute to treatment outcome (including pain and function)

A total of US $1,000,000 will be available to fund approximately five individual research proposals of between $50,000 and $200,000. The deadline for submission is September 15.

Predoctoral Students Eligible for NIA Award

The National Institute on Aging (NIA) invites outstanding graduate students from a wide range of broad research areas — including, but not limited to, statistics, neuroscience, physics, immunology, microbiology, informatics, data sciences, psychology, (bio)behavioral science, anthropology, demography, sociology, social epidemiology, economics, public health, and engineering — to apply for its Transition to Aging Research Award for Predoctoral Students. Its purpose is to increase, retain, and diversify the pool of trainees in aging and geriatric research. This two-phase award will allow awardees to complete doctoral dissertation projects and provides a variety of training supports to facilitate the smooth transition of doctoral graduates into competitive, aging-focused postdoctoral positions. Applications are due by October 22. Visit the full funding opportunity announcement for additional details.

NIH Funds Slated for Down Syndrome Research

The National Institutes of Health (NIH) and several participating organizations are encouraging exploratory/developmental phased innovation grant applications to support development of clinical trials to treat critical and co-occurring health conditions in individuals with Down syndrome. The proposed research aims should be milestone-driven. The total project period for an application submitted may not exceed five years. This announcement provides support for up to two years for preliminary/developmental/planning studies, followed by possible transition to clinical trial support of up to three years, although the total duration of the award may not exceed five years. The next available application due dates are November 3, 2020, and November 3, 2021. Letters of intent are due 30 days prior to the application due date. Visit https://bit.ly/2vPqjmg for more information.

Continued from page 1 – GSA Forms Diversity and Justice Working Group

The working group’s roster includes:

• Keith Whitfield, PhD, FGSA, University of Nevada, Las Vegas
• Adrienne Aiken-Morgan, PhD, North Carolina A&T State University
• James Appleby, BSPharm, MPH, ScD (Hon), The Gerontological Society of America
• Terri Harvath, PhD, RN, FGSA, University of California, Davis
• Carl V. Hill, PhD, MPH, Alzheimer’s Association
• Yuri Jang, PhD, FGSA, University of Southern California
• S. Michal Jazwinski, PhD, FGSA, Tulane University
• Charles Mouton, MD, FGSA, University of Texas Medical Branch at Galveston
• Ronica Rooks, PhD, FGSA, University of Colorado, Denver
• Tetyana Shippee, PhD, FGSA, University of Minnesota
• Roland Thorpe, PhD, FGSA, Johns Hopkins University
• Elizabeth Vasquez, DrPH, University at Albany
• Robert Weech-Maldonado, PhD, FGSA, University of Alabama at Birmingham

GSA has a tradition of supporting an inclusive environment in aging research, education, and practice. Since 1987, the organization has been guided by a Minority Issues in Gerontology Advisory Panel, which seeks to increase the quantity and quality of research related to minority aging issues and to attract minority members in Society activities and governance.

“The new working group is made up of committed GSA member leaders but the real hard work to produce change will be all Society members’ responsibility,” Whitfield said.
Hello from Elliane Irani and Briana Sprague, your Behavioral and Social Sciences (BSS) Section ESPO junior leaders! We would be remiss to ignore the wider context in which we work and live, so we want to use this platform to provide some early career thoughts on fighting racial injustice and the impact of COVID on potential careers.

**Briana Sprague**

I am a postdoctoral fellow in the Population Neuroscience of Alzheimer’s Disease and Aging-Related Dementias training program at the University of Pittsburgh. I have been a GSA member since joining as an undergrad in 2012 and am thrilled to serve such a great community.

In the wake of #BlackInTheIvory and executive orders targeting our international student colleagues, I’ve been thinking about how we can dismantle white supremacy in gerontology and science generally and wanted to share some thoughts.

We should amplify minoritized people’s voices beyond solely having them serve on panels to answer, “What it’s like to be a member of X group in gerontology.” Our colleagues do groundbreaking research across a breadth of topics, and they should be invited to talk about more than their experiences in the academy. Don’t know where to start? Check out BlackInNeuro.com! This is a great new community to celebrate “Black excellence in neuroscience related fields” and includes social media conversations, profiles for speakers and mentors, as well as #BlackInNeuroWeek (held July 27 to August 2). This is a great resource and a wonderful way to get stay connected with a community, especially as we embrace a remote format in the future.

We should also continue advocating for our international colleagues. The Trump administration has backed down from their xenophobic executive order prohibiting international students from staying in the U.S. if courses were online-only, but now isn’t the time to assume the fight’s over. Our international students are valuable beyond what they provide the university in prestige, tuition, and labor — they are valuable as individuals. We need to keep protecting them while realizing that reducing their contributions to finances/prestige is harmful. Let’s recognize the humanity of our colleagues as well.

**Elliane Irani**

I recently transitioned to an assistant professor role at the Frances Payne Bolton School of Nursing at Case Western Reserve University. After graduating with a Bachelor of Science in Nursing from Lebanon, my first clinical experience was in the intensive care unit and I soon became interested in understanding the factors that influence the psychological recovery of ICU survivors and how family members play a role during that transitional period.

I received a PhD in Nursing focusing on clinical decision making and healthcare transitions from the University of Pennsylvania. My program of research has evolved to examine associations between psychological and behavioral factors that would contribute to health outcomes in adults with chronic illness and their family caregivers.

I joined GSA as a doctoral student in 2013 and have enjoyed the connections that I made with other GSA members over the past seven years. I am happy to share some strategies that have facilitated my transitions across different roles over the past few years. We are all aware of the challenges that one could face at the time of any transition, both at the professional and personal levels.

So I encourage you to start by thinking about what matters to you. When you know what’s most meaningful to you, then you can identify a career path that is well-aligned with your vision and set SMART goals for yourself. I have also maintained a stable support network and regular check-ins with friends and colleagues who are able to hold me accountable. Lastly, I learned how to better appreciate my strengths and what I have to offer to myself and others.

I recently signed up for the National Center for Faculty Development and Diversity and found their messages very helpful. Check out if your institution is a member and start enjoying their benefits. That’s just one way for you to get continuous support and encouragement so you remain focused and motivated. You may have access to other resources; ask around and make the best use of similar services! For those who are worried about what the future holds and how to navigate the job market during these uncertain times, don’t forget to sign up for the upcoming ESPO webinar.

As junior leaders in the BSS section, we had the opportunity to work closely with the executive committee. We also organized a BSS-ESPO symposium for the upcoming scientific meeting. Early-career scientists and postdoctoral fellows will present their work on promoting behaviors that support healthy aging. We are privileged to welcome Dr. Luke Stoeckel from the National Institute on Aging who will serve as our discussant and provide his insight on developing a program of research in behavioral interventions and securing federal funding. We look forward to “seeing” you at GSA 2020!
What are some key pedagogical considerations you keep in mind when teaching students about aging? How has your approach changed for you over the years?

Wolske: I think about what the students need — both the background (historical and multidisciplinary) and the progressive information from the most current statistics and resources — all the way to predictions of future trends.

I learned over time that students in gerontology come from many varied backgrounds of life, work and experience, as well as various age groups and academic disciplines. I need to be sensitive to the mix of students in each class and flexible in my approach, while still providing the most current and relevant content that meets the course and learning objectives.

In your experience, what are some key barriers and facilitators to “reaching students” about the importance of aging, dispelling aging myths, and the relevance of these skills and knowledge in their respective fields?

Wolske: The main barrier, in my opinion, to students’ understanding about aging, myths of aging, and how to counteract the stereotypes in their discipline or field of work is cultural conditioning. Research indicates how our society in the U.S. is youth-orientated and hyper-fixated on youth/beauty which sends older people “down the shuffle-board” so-to-speak to the other end of the spectrum labeled with “undesirable” characteristics.

The best way to help students understand the gross injustice of ageism and how it will one day hurt them personally, is to give them opportunities to interact with older adults and to try to put themselves “in their shoes.”

Listening to the stories of older adults they interview and then thinking about themselves at an advanced age, and describing how they want their later life to look and feel can increase this understanding.

What motivates you to do this work (and how has this changed over time)?

Wolske: After I experienced a back injury while working as a certified nursing assistant (from 1993 to 1995), I had to quit that work, appropriate resources and guidance they need. I started teaching my first aging course with no experience, syllabus, or a book because the scheduled instructor died in a car accident on a Friday night, and they needed a teacher to show up on the following Monday night.

After 15 years, I still love it because working as a certified nursing assistant (from 1993 to 1995), I had to quit that work, which I enjoyed tremendously. I went to college and fell in love with gerontology studies. I knew that was the path for me as an educator.

After 15 years, I still love it because there is always something new to learn about getting older. As I age I understand and empathize more with older adults. It is a learning experience while I teach!

What is unique about teaching aging in an online environment? How do you leverage and/or navigate these factors to strengthen your approach?

Wolske: My first teaching assignments were face-to-face in the classroom. I loved the personal interactions with students (see the “light bulb”), but I also felt unprepared to deal with the myriad of social and psychological issues they presented on a day-to-day basis that had nothing to do with my role.

In 2009, when we decided to transition all of our courses from a hybrid model into a completely online format, it was an adjustment and there was a steep learning curve. It was about learning the new skills I needed to facilitate student learning rather than “deliver” content to them.

The need to develop content well in advance and structure the information with a strategy in mind (we use the Quality Matters approach) made me a much better educator and it gives me satisfaction that our online courses are providing a relevant learning experience. This is borne out from their comments in the course discussions and end-of-semester evaluations.

I enjoy giving an occasional guest lecture in other classes, but I believe the depth and breadth of education we offer in our online courses is vastly superior to what we provided in the physical classroom because now everything is double-checked (and up-to-date) before students receive it and there is much better oversite in online courses. We are called to a higher standard which is good for teachers as well as students.

What advice would you give to a new gerontology educator who is developing their first course about aging?

Wolske: My best advice to anyone who is developing their first course about aging is to seek out the people who are excellent examples of success in your field. Don’t try to reinvent the wheel (you can work on that later when you know the wheel better!).

Some universities send novices into the classroom without the appropriate resources and guidance they need. I started teaching my first aging course with no experience, syllabus, or a book because the scheduled instructor died in a car accident on a Friday night, and they needed a teacher to show up on the following Monday night.

I learned that you do not have to be perfect. You do have to be authentic. If you love gerontology, tell the students how and why you love it. They will appreciate your passion.

I found out years later after I went to my former professor for my Sociology of Aging class that he had never taught it before and had no idea what he was talking about. What affected me was how he expressed the importance of the information he was discussing and, then, it mattered to me to learn more. That’s our job.

We can inspire students to want to know more about gerontology and understand why it’s important to them. That’s how learning happens — and I would not trade this work for any other in the world!
CDC Updates Public Data Portal on the Health of Older Adults

The U.S. Centers for Disease Control and Prevention (CDC) recently updated the Alzheimer’s Disease and Healthy Aging Data Portal, which provides access to a range of national, regional, and state data on older adults. This resource allows users to examine data on key indicators of health and well-being for older Americans, including caregiving and cognitive decline, by age group, gender, and race/ethnicity.

The portal was updated with 2018 BRFSS data, including data on cognitive decline from 50 states and data on caregivers from 44 states. Portal users can retrieve CDC data by indicator or by geographic area, and then use these data to develop reports and create customized maps, charts, and graphics. Public health professionals can use the data to create a snapshot of the health of older adults in their states, which can help them prioritize and evaluate public health interventions.

Report Explores Impact of Heat on Older Adults

A new Climate Central report, “Seniors at Risk: Heat and Climate Change,” examines how heat and a warming climate endanger the health of an aging U.S. population, a threat made even more worrisome during the COVID-19 pandemic. The report found that approximately 12,000 Americans die annually from heat-related causes, according to recent research — roughly equivalent to the number of U.S. gun homicides. Eighty percent of heat-related fatalities occur in people age 60 and older. Isolation is a leading contributor to heat deaths, and social distancing recommendations during the COVID-19 pandemic create what one expert called “perfect storm” conditions for heat deaths among older Americans. The report also indicated that older adults’ risk of heat death is increased by common medications and physiological changes associated with aging.

Journal Explores Policy and Practice Implications of COVID-19

The Journal of Aging & Social Policy has published a special issue titled “Older Adults and COVID-19: Implications for Aging Policy and Practice,” which consists of 28 contributions by leading scholars who explore the myriad ways in which the COVID-19 pandemic has affected older adults and their families, caregivers, and communities. It proposes policies and strategies for protecting and improving the lives of older people during the pandemic. It draws lessons for aging policy and practice more generally, given underlying challenges brought to the fore by government, provider, community, and individual responses to the pandemic.

LTSS Report Looks at Six States’ Initiatives

The LeadingAge LTSS Center @ UMass Boston has released a new report, “Learning from New State Initiatives in Financing Long-Term Services and Supports.” In partnership with the Center for Consumer Engagement in Health Innovation at Community Catalyst, the center examined activity across six states — Washington, Hawaii, Maine, California, Michigan, and Minnesota — that are exploring social insurance initiatives to help finance long-term services and supports (LTSS).

Using a qualitative, case-study approach, the authors describe the nature and evolution of LTSS finance reform efforts, based on structured interviews with 42 key stakeholders in the six states. The report:

• describes the policy change that was proposed or adopted in each of these states.
• identifies the common themes that emerged from key stakeholder interviews.
• draws out implications and lessons learned — specifically, best practices for coalition-building and advancing reforms.

WHO Brief Offers COVID-19 Guidance for Long-Term Care

The World Health Organization (WHO) has released a policy brief, “Preventing and Managing COVID-19 Across Long-term Care Services.” The document provides 11 policy objectives and key action points to prevent and manage COVID-19 across long-term care. Its intended audience is policy-makers and authorities (national, subnational, and local) involved in the COVID-19 pandemic. The brief builds on currently available evidence on the measures taken to prevent, prepare for, and respond to the COVID-19 pandemic and to mitigate impact across long-term care services, including care providers.

Long-standing problems in long-term care systems are addressed along with ways to transform health and long-term care services so that long-term care services are readily integrated and provided as part of the continuum of care that includes health promotion, prevention, treatment, rehabilitation, and palliation. Among the brief’s authors are GSA members Liat Ayalon, PhD, Terry Fulmer, PhD, RN, FGSA, and Terry Lum, PhD, FGSA.

NACCHO Issues Local Health Department Profile

The National Association of County and City Health Officials (NACCHO) has released its 2019 National Profile of Local Health Departments — the most comprehensive data on the work of public health departments at the county and city level. Findings show that local health departments experienced a loss of 21 percent of their workforce capacity over the past decade, hindering a timely and robust local public health response to COVID-19.

In addition, budget shortages have affected local health department emergency preparedness and response programs. In 2019, more than 80 percent of local health departments experienced either a decreased or stagnant preparedness budget compared to the previous fiscal year. The prolonged lack of financial and human resources allocated to bolstering local health department emergency preparedness work has posed a challenge during this uncertain time, according to the new study.
Eye Scanner Detects Molecular Aging in Humans

People often say that eyes are windows to the soul. Now it appears they may also be windows to human aging.

All people age, but individuals do so at different rates, some faster and others slower. While this observation is common knowledge, there is no universally accepted measure of biological aging. Numerous aging-related metrics have been proposed and tested, but no marker to date has been identified or noninvasive method developed that can accurately measure and track biological aging in individuals.

In what is believed to be the first study of its kind, researchers from Boston University School of Medicine (BUSM) have discovered that a specialized eye scanner that accurately measures spectroscopic signals from proteins in lens of the eye can detect and track biological aging in living humans.

According to the researchers, chronological age does not adequately measure individual variation in the rate of biological aging. Their findings appear in The Journals of Gerontology, Series A: Biological Sciences and Medical Sciences.

“The absence of clinical tools and metrics to quantitatively evaluate how each person is aging at the molecular level represents a major impediment to understanding aging and maximizing health throughout life,” explained corresponding author Lee E. Goldstein, MD, PhD, associate professor of neurology, pathology & laboratory medicine, psychiatry, and ophthalmology at BUSM.

“The lens contains proteins that accumulate aging-related changes throughout life. These lens proteins provide a permanent record of each person’s life history of aging. Our eye scanner can decode this record of how a person is aging at the molecular level.”

The researchers believe these results pave the way for a potentially transformative clinical tool for objective assessment and tracking of molecular aging in humans.

Declining Eyesight Improved by Looking at Deep Red Light

Staring at a deep red light for three minutes a day can significantly improve declining eyesight, finds a new UCL-led study, the first of its kind in humans.

Scientists believe the discovery, published in The Journals of Gerontology, Series A: Biological Sciences and Medical Sciences, could signal the dawn of new affordable home-based eye therapies, helping the millions of people globally with naturally declining vision.

“As you age your visual system declines significantly, particularly once over 40,” said lead author Professor Glen Jeffery of the UCL Institute of Ophthalmology. “Your retinal sensitivity and your color vision are both gradually undermined, and with an aging population, this is an increasingly important issue. To try to stem or reverse this decline, we sought to reboot the retina’s aging cells with short bursts of longwave light.”

In humans around 40 years-old, cells in the eye’s retina begin to age, and the pace of this aging is caused, in part, when the cell’s mitochondria, whose role is to produce energy (known as ATP) and boost cell function, also start to decline. Mitochondrial density is greatest in the retina’s photoreceptor cells, which have high energy demands. As a result, the retina ages faster than other organs, with a 70 percent ATP reduction over life, causing a significant decline in photoreceptor function as they lack the energy to perform their normal role.

Researchers built on their previous findings in mice, bumblebees, and fruit flies, which all found significant improvements in the function of the retina’s photoreceptors when mice were exposed to 670 nanometer (long wavelength) deep red light.

“Mitochondria have specific light absorbance characteristics influencing their performance: longer wavelengths spanning 650 to 700 nanometer are particularly effective in stimulating ATP production in mitochondria.”

The framework for clinical implementation of this technology to measure molecular aging is similar to other recently adopted clinical biomarkers, including PET brain imaging for Alzheimer’s disease, bone densitometry for osteoporosis and serum blood tests for diabetes mellitus,” added Goldstein, who also holds an appointment at Boston University College of Engineering.

While large test batteries incorporating composite metrics have been developed to track human aging, these are far removed from underlying molecular mechanisms of aging and are ill-suited for personalized longitudinal medical care.

“By contrast, eye scanning technology that probes lens protein affords a rapid, noninvasive, objective technique for direct measurement of molecular aging that can be easily, quickly, and safely implemented at the point of care. Such a metric affords potential for precision medical care across the lifespan,” Goldstein said.

The research team included investigators at Boston University College of Engineering and School of Public Health, Boston Children’s Hospital, Massachusetts General Hospital, Harvard Medical School and the University of Washington, Seattle.

This research was supported by Massachusetts Lions Eye Research Fund and the Children’s Hospital Ophthalmology Foundation, Boston, Massachusetts.
Continued from page 1 – Fellowships Will Advance Reporters’ Coverage of Aging Issues

The program will commence with a short series of exclusive background and issue-focused educational sessions, taking place across four days between October 28 and November 12. Fellows will additionally participate in GSA’s Annual Scientific Meeting Online. The fellowship will showcase research highlights from the meeting and other sources, and host discussions with veteran journalists on how to position aging stories in the current media environment.

The fellowship requires reporters to deliver two projects based on current aging research, including a short-initial story and major piece or series in the following months. All applications for the fellowship program will be reviewed by a selection committee of gerontologists and editorial professionals. The criteria will include clarity and originality of proposed in-depth story projects; quality of samples of published or produced work; and high-impact potential of proposals geographically and across different ethnic or racial populations.
The GSA 2020 Annual Scientific Meeting Online will bring together over 4,000 international professionals in the field of aging—including researchers, educators, scientists, health care professionals, influential thought leaders, and industry experts—to address today's most pressing issues in the field. Join us to expand your knowledge, share your research, and network with colleagues at GSA's state-of-the-art online conference.

REGISTRATION NOW OPEN!