Journalism Fellowships Will Highlight New Developments in Aging

GSA has received renewed grant support to welcome a new class of reporters for the Journalism in Aging Fellows Program. The 2021 funders to date include Silver Century Foundation, RRF Foundation for Aging, The Commonwealth Fund, Archstone Foundation, and The John A. Hartford Foundation.

Since its founding in 2010, this program has been responsible for more than 700 news stories produced by 185 alumni. It has two goals: to educate journalists about issues in aging, better allowing them to spread awareness to general-audience, ethnic, and other minority populations; and to disseminate information about new scientific findings, policy debates, innovations, and evidence-based solutions.

“With the support of our funding partners, the journalist fellows are able to build connections to expert sources on aging, to each other, and to their communities,” said Todd Kluss, MA, GSA’s director of communications. “As a result, they are equipped to provide accurate, fact-based coverage to diverse audiences in a time when misleading news is often encountered.”

Kluss co-directs the Journalists in Aging Fellows Program together with Liz Seegert, who serves as program coordinator of the fellowship’s media partner, the Journalists Network on Generations.

“The COVID-19 pandemic put aging issues on the front burner for many and highlighted the need to tell older adults’ diverse stories,” Seegert said. “I’m excited to help journalists strengthen their reporting on the key topics that continue to impact us as we age.”

The program’s co-founder, Journalists

Continued on page 6

Reframing Aging Gains Momentum in Countering Ageism

The long-term social change endeavor known as the Reframing Aging Initiative is continuing to expand by enlisting new partners and increasing the number of its program offerings.

The initiative, which has been headquartered at GSA for the past two years, is designed to improve the public’s understanding of what aging means and the contributions older people bring to society. This greater understanding will help to counter ageism and guide our nation’s approach to ensuring healthy and productive aging for all people across the life course.

To provide updates on its current direction, Gerontology News recently conducted an interview with GSA Vice President of Policy and Professional Affairs Patricia M. “Trish” D’Antonio, BSPharm, MS, MBA, BCGP, who serves as project director of the Reframing Aging Initiative.

Gerontology News: To bring our readers up to date, can you tell us about the stakeholders involved?

Trish D’Antonio: The Reframing Aging Initiative was launched in 2014 by eight organizations — collectively known as the Leaders of Aging Organizations (LAO) — as a way to address negative views of aging, promote more accurate perceptions of aging, and develop supportive aging policies. This included GSA, AARP, the American Federation for Aging Research, the American Geriatrics Society, the American Society on Aging, Grantmakers in Aging, the National Council on Aging, and the National Hispanic Council on Aging. In the last year, we’ve welcomed LeadingAge and USAging, formerly the National Association of Area Agencies on Aging.

Our current work is funded by Archstone...
Let’s Author Vaccine Success Stories on Multiple Fronts

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

There are many conversations, debates, and arguments about vaccine requirements and masking taking place now in local school districts and across campuses. And as it’s back-to-school season and many GSA members are based in college and university settings, you may find yourselves engaged in dialog with people approaching these issues from many perspectives.

What’s the most effective way to have a fruitful conversation on these issues? I’ve come across several resources that may help you have meaningful dialog on these emotionally-charged issues, and the approaches are broadly applicable to many vaccines.

In July, The Atlantic ran an article titled “America Is Getting Unvaccinated People All Wrong.” One of its main insights was that the unvaccinated population in this country is not a monolithic bloc. Many are in communities without logistical access to vaccines or access to someone who can listen to concerns and answer questions they may have. And this group of concerned individuals is very different from vocal anti-vaxxers.

The U.S. Centers for Disease Control and Prevention (CDC) has a page titled “How to talk about COVID-19 vaccines with friends and family.” It gives helpful guidance in listening to questions with empathy, asking open-ended questions, getting permission before sharing information, helping others find a reason to get vaccinated, and helping people make a vaccination decision.

Likewise, global entities like UNICEF and the World Health Organization provide guidance about talking about cultivating confidence on vaccines. A number of U.S. institutions and groups, like the Partnership to Fight Infectious Disease, Cleveland Clinic, and Johns Hopkins Bloomberg School of Public Health, have helpful information, too.

And thanks to the work of GSA’s National Adult Vaccination Program Workgroup, COVID-19 Task Force, and other partners, our own website includes many tools to support you. GSA members can help build confidence in conversations with older adults about COVID-19 vaccines, including confidence about the providers administering the vaccines and the process by which the vaccines have been developed.

With our collective focus almost exclusively on COVID-19, let’s not forget about the upcoming flu season. The power of the flu vaccine, combined with widespread mask use and physical distancing in place to fight the COVID-19 pandemic, gave us the mildest flu season on record in 2020. It looks like we may not have the distancing or mask safeguards in widespread effect again this season, making your flu shot more important than ever. We have it within our power to curb infections on multiple fronts through the power of vaccinations.

GSA, in collaboration with the Gerontological Advanced Practice Nurses Association and AMDA, collaborated on a project focused on improving education and awareness of enhanced influenza vaccine products for those who are 65 and over. The partnership yielded valuable fact sheets. And remember, much like our shots to prevent COVID-19, flu vaccine has been shown in several studies to reduce severity of illness in people who get vaccinated but still get sick. Please help spread the word about these often unappreciated benefits of getting vaccinated.

Lastly, let’s remember the principles of the Reframing Aging Initiative, the multi-stakeholder endeavor that GSA co-founded to counter ageism by changing how we talk about aging. We know from our research that “otherizing” segments of our population does not lead to positive outcomes. How we talk about vaccines is as important as how we talk about aging, and we want to do it in a way that moves us all forward and saves lives. By acting together, and having meaningful conversations with concerned individuals we meet, we can make an essential contribution to reduce the spread of vaccine-preventable disease. Thank you!
In Memoriam

Judith Kasper, PhD, passed away at age 72 on August 4. She was a professor of health policy and management at the Johns Hopkins Bloomberg School of Public Health. Her research and teaching focused on health policy in disability and long-term care; assessment of needs for care and service provision to physically and mentally disabled people; health care financing and access for vulnerable populations; and the development and application of data sources — national surveys in particular — for health policy analysis and health services research.

She was the principal investigator of the National Health and Aging Trends Study funded by the National Institute on Aging to support research on disability trends and dynamics among older people. She was the sole author of two books and joint author of more than 150 peer-reviewed publications.

Members in the News

- Bérénice Benayoun, PhD, was quoted in a July 21 SciTechDaily article titled “New Research Reveals Immune Cell’s Response to Pathogens Differs Greatly by Sex and Age.”
- ABC News quoted Terry Fulmer, PhD, RN, FAAN, FGSA, in an August 2 story titled “Nursing home advocates shift stance on mandatory COVID-19 vaccinations for staff.”

Colleague Connection

This month’s $25 amazon.com gift certificate winner:
Scott E. Wilks, MSW, PhD, FGSA

The recipient, who became eligible after referring new member Carolyn Le, MSW, 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:
Erica L. O’Brien, PhD

Clevenger Earns Spot on Georgia Board

Carolyn Clevenger, RN, DNP, AGPCNP-BC, GNP-BC, FAANP, FGSA, was recently appointed to the Georgia Board of Health Care Workforce by Governor Brian Kemp. The board aims to provide Georgia communities, especially in medically underserved areas, with improved access to needed physicians and other health care practitioners. It identifies and meets the health care workforce needs of Georgia communities through the support and development of medical education programs.

Clevenger is the clinical director and a practicing nurse practitioner at the Emory Integrated Memory Care Clinic.

Hayflick Recognized for Pioneering Cellular Senescence Research

GSA Past President Leonard Hayflick, PhD, has been awarded The First Honorary Membership in The International Cell Senescence Association for his “Seminal Discovery of Cellular Senescence.” In a virtual award ceremony, Hayflick told the participants that because the Merriam-Webster’s dictionary defines a “serendipitist” as “... one who finds valuable or agreeable things not sought for” that he qualifies because in his research on the viral etiology of cancer, he first attributed the failure of cell replication in his serial cultures of normal human fetal fibroblasts to the 60-year old dogma that he had erred in his culture techniques.

After observing that only cells in cultures that underwent the most replications stopped dividing, he disproved the dogma by finding that only cancer cells are immortal and that normal cell mortality is caused by intra-nuclear events. He interpreted this to be senescence, or aging, at the cellular level. This redirected aging research from extracellular to intracellular causes. Years’ later telomere attrition and telomere expression, found by others, explained the molecular etiology of his phenomenological findings. Hayflick stated that aging is a universal phenomenon of all matter and that it is explained by the Second Law of Thermodynamics.

Bowen, Locks Named NBNA Nurses of the Year

Pamela G. Bowen, PhD, CRNP, FNP-BC, BBA, and Salamah Locks, MS, APRN-BC, PHN, are among nine recipients of the 2021 Nurse of the Year Award from The National Black Nurses Association (NBNA). This honor is given for outstanding contributions in the areas of leadership, innovation, research, business, and science.

Bowen is an associate professor at the University of Alabama at Birmingham School of Nursing. Locks is a commissioner on the Marin County Commission on Aging in San Raphael, California. The NBNA is a professional organization representing 308,000 African American registered nurses, licensed vocational/practical nurses, and nursing students in 108 chapters and 34 states.

Alfaro, Jarrott, Mosqueda Among New Class of Policy Fellows

The Health and Aging Policy Fellows Program has announced its 2021-2022 cohort, with three GSA members among the group: Ana Jessica Alfaro, PsyD, Shannon E. Jarrott, PhD, FGSA, and Laura Mosqueda, MD. The program aims to create a cadre of leaders who will serve as change agents in health and aging policy to ultimately improve the health care of older adults. The year-long fellowship offers a rich and unique training and enrichment program that is focused on current policy issues, communication skills development, and professional networking opportunities to provide fellows with the experience and skills necessary to help affect policy.

Alfaro is a research fellow at the VA Palo Alto Geriatric Research, Education, and Clinical Center and a postdoctoral scholar in the Department of Psychiatry and Behavioral Sciences at the Stanford University School of Medicine; Jarrott is a professor of social work at The Ohio State University; and Mosqueda is a professor of family medicine and geriatrics in the Keck School of Medicine at the University of Southern California.
November Brings New Round of Diverse Policy Series Offerings

Under the leadership of GSA President Terri Harvath, the Program, Publications, and Products Committee, and the program working groups, this year’s Annual Scientific Meeting — with the theme of “Disruption to Transformation: Aging in the ‘New Normal’” — will take place November 10 to 13 in Phoenix, Arizona, at the Phoenix Convention Center and the conference hotel, the Downtown Sheraton.

As I hope you have heard by now, GSA has adopted a vaccination required policy for all registered attendees attending the 2021 Annual Scientific Meeting in Phoenix. For those who either can’t make this year’s meeting or do not feel comfortable attending in-person, there is an on-demand viewing registration option, so all registered attendees will be able to view recorded presentations on the on-demand platform whether you’re with us in Phoenix or not. Visit gsa2021.org for more information.

We are quite pleased with the numerous policy-focused sessions offered at this year’s ASM. I’ll use this month’s article to share with you some of the highlights from our annual Policy Series.

I look forward to seeing you in Phoenix!

Wednesday, November 10
Family Caregiving Policies — Where We Are Now
2:30 to 4 p.m. in Phoenix Convention Center Room 125A
Chair: Pamela Nadash
Co-Chair: Rani Snyder
Panelists: Wendy Fox-Grage, Molly R. Evans, Grace J. Whiting
Discussant: Eileen J. Tell

This session reviews prospects for advancing family caregiving policy under the Biden Administration, by reporting on the RAISE (Recognize, Assist, Include, Support, and Engage) Family Caregivers Act, enacted in January 2018. The act directs the secretary of health and human services to develop a national family caregiving strategy, and supports research and consensus-building activities, in collaboration with The John A. Hartford Foundation. It aims to identify actions that communities, providers, government, and others may take to recognize and support family caregivers.

To this end, the Administration for Community Living has convened an Advisory Council, comprising 15 voting members from various stakeholder groups, to guide the effort; the project also commissioned primary data collection on caregiver priorities and recommendations, using a request for information in the Federal Register garnering roughly 1,600 responses, 12 focus groups with diverse family caregivers, and listening sessions with stakeholder groups.

Wendy Fox-Grage of the National Academy on State Health Policy, who leads the data analysis component, will present findings from the commissioned research, while Molly Evans of the Massachusetts Executive Office of Elder Affairs will review the current state of state-level policies aimed at supporting family caregivers. The symposium will conclude with Grace Whiting, CEO of the National Alliance for Caregiving, who will present an advocate’s perspective on the status of family caregiving policy. Eileen Tell, of ET Consultants, will act as discussant.

Building Momentum for Diversity, Equity, and Inclusion in Geriatrics and Gerontology Education
4:30 to 6 p.m. in Phoenix Convention Center Room 125A
Chair: Jennifer J. Severance
Co-Chair: Barbara Gordon
Panelists: Katherine Bennett, Charles Alexander, Monica Long, Jung-Ah Lee, Anna Goroncy
Discussant: Brian W. Lindberg

With an increasingly multicultural and diverse older adult population, health care professionals must be prepared to serve older adults from varied backgrounds and marginalized communities; address health determinants and disparities; and promote diversity, equity, inclusion, and empathy within systems of care. The National Association for Geriatrics Education (NAGE) is a non-profit organization representing geriatric and gerontology education and training programs, including Health Services and Resource Administration (HRSA) funded Geriatric Workforce Enhancement Programs (GWEPs), and Geriatric Academic Career Awardees (GACAs). The 48 GWEPs focus on improving health outcomes for older adults by enhancing geriatrics and primary care training of the healthcare workforce.

The 26 GACA awards support leaders in Age-Friendly health care transformation and interprofessional clinical geriatrics training. This symposium examines the role both programs have in reducing racial health disparities in older adults by promoting increased diversity of the geriatrics/gerontology workforce and advancing public policies for racial equity and inclusion. First, presenters will introduce the NAGE Diversity and Racial Equity Workgroup that supports a broader and unified effort across GWEPs and GACAs for equity and inclusion in geriatrics and gerontology education. Presenters will then share strategies to mobilize system-level changes within their institutions. Finally, examples of progress showcase individual GWEP and GACA projects and partnerships aimed at reducing racial health disparities within a multidimensional and local context. Presenters discuss strategies and opportunities to disrupt and transform health professions education at multiple levels and implications for policies supporting optimal aging for all older adults.
Thursday November 11
Update on Polling and Policy Efforts on Loneliness, Telehealth, Caregiving, and Advance Care Planning
8 to 9:30 a.m. in Phoenix Convention Center Room 125A
Chair: Erica Solway
Panelists: Amanda Leggett, Ph.D., Andrew MacPherson, Wendy Fox-Grage, Grace J. Whiting
Discussant: Brian W. Lindberg
Older adults and their caregivers experienced dramatic changes in many aspects of their lives during the COVID-19 pandemic which resulted in important shifts in organizational and federal priorities and policies. To explore older adults’ changing experiences and perspectives amidst the pandemic, the University of Michigan National Poll on Healthy Aging (NPHA), a recurring, nationally representative household survey, polled over 2,000 adults age 50 to 80 at multiple timepoints through January 2021 about their feelings of loneliness and use of telehealth.
In June 2020, the NPHA also surveyed adults age 50 to 80 about advance care planning before and during the COVID-19 pandemic and asked family caregivers about their care challenges in the three months since the pandemic. This session will start with a presentation of results from these polls, first exploring change over time in loneliness and telehealth use and then focusing on experiences related to advance care planning and caregiving challenges. Next, presenters from diverse national coalitions and organizations, including the Coalition to End Social Isolation and Loneliness, the National Academy for State Health Policy, the National Alliance for Caregiving, and the Coalition to Transform Advanced Care will describe their organizations’ efforts, including their work with research and advocacy partners, state and federal agencies, and the Biden administration to facilitate dialogue and advance activities and policies related to these timely topics.
Friday November 12
The Older Americans Act, the Aging Network, and the Pandemic
8 to 9:30 a.m. in Phoenix Convention Center Room 125A
Chair and Moderator: Brian W. Lindberg
Panelists: Panelists: Katie Jantzi, Amy E. Gotwals, and others invited
This session will provide insights into how the pandemic challenged the capabilities and ingenuity of the Older Americans Act programs and the aging network. Speakers will include key aging network stakeholders, who will discuss the overnight evolution of programs serving often isolated older adults.
Congressional Update
12 to 1:30 p.m. in Phoenix Convention Center Room 125A
Chair and Moderator: Brian W. Lindberg
Panelists: Staff of the U.S. Senate and House, and aging advocates
This popular annual session will provide cutting-edge information on what the 117th Congress has and has not accomplished to date, and what may be left for end of the First Session. Speakers will discuss key issues such as pandemic relief, budget reconciliation, Social Security, Medicare, Medicaid, and the Older Americans Act.
COVID-19: How It Shaped Nursing Home Care and Elder Justice
4:30 to 6 p.m. in Phoenix Convention Center Room 125A
Chair and Moderator: Brian W. Lindberg
Panelists: Panelists: Bob Blancato, Lori Smetanka, Mairead Painter
This session will provide updates on how the pandemic led to horrific situations in long-term care facilities and how the pandemic influenced major federal efforts to address elder abuse, neglect, and exploitation.
Saturday November 13
Ageism: Outcomes, Interventions, Future Directions
8 to 9:30 a.m. in Phoenix Convention Center Room 125A
Chair: Kelly M. Trevino
Co-Chair: Patricia M. D’Antonio
Panelists: Karen I. Fredriksen, Gregory A. Hinrichsen, Tracey Gendron
After attending this session, participants will be able to describe GSA’s major initiative in Reframing Aging and why it is critical to our work in policy and practice. Panelists will address ways to address ageism, stigma, and bias; aging attitudes and late-life psychotherapy; and anti-ageism interventions.
Public Policy Panel Interdisciplinary Symposium
12 to 1:30 p.m. in Phoenix Convention Center Room 129A
Chair: Brian W. Lindberg
Panelists: Phillip Rozario (SRPP), Stephen Helfand (BS), Tamara Baker (BSS), Cynthia Brown (HS), Judith Howe (AGHE), Darina Petrovsky (ESPO)
Discussant: Lori Simon-Rusinowitz
This interactive session is an interdisciplinary look at policy issues in aging with the speakers representing GSA’s 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.
Recent GSA Policy Actions
GSA supported the National Adult and Influenza Immunization Summit (NAIIS) call for providers across the health care spectrum to take actions to improve vaccination of adults. Specifically, NAIIS calls on all clinicals and other healthcare providers to follow the National Vaccine Advisory Committee’s Standards for Adult Immunization Practice. Taking these actions will help protect adults across the U.S. against preventable illness, disability, and death.
GSA signed on to a letter in support of continuing federal requirements for mask wearing on public transportation. The letter was led by the Infectious Disease Society of America, Trust for America’s Health, and the Council of Medical Specialty Societies.
**NIA Will Enable Teams to Lead AD/ADRD Therapy Development**

A new funding opportunity announcement from the National Institute on Aging (NIA) seeks to enable the development of a diverse, translational research workforce capable of participating and/or leading cross-disciplinary team science programs focused on advancing therapy development for Alzheimer’s disease (AD) and AD-related dementias (ADRD).

This opportunity will support institutional training programs for predoctoral and postdoctoral level researchers with diverse educational backgrounds (i.e., basic biology, translational and clinical research, data science and behavioral research). The program invites eligible institutions to develop interdisciplinary training programs that will provide trainees with the knowledge and skills in data science, disease biology, and traditional and emerging drug discovery disciplines necessary to conduct rigorous and cutting-edge basic, translational, and clinical research for AD and ADRD.

The grant does not allow appointed trainees to lead an independent clinical trial, but does allow them to obtain research experience in a clinical trial led by a mentor or co-mentor. The next application due date is September 27.

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**NIA Offers New Round of GEMSSTAR Grants**

The Grants for Early Medical/Surgical Specialists’ Transition to Aging Research (GEMSSTAR) program, offered by the National Institute on Aging (NIA), provides support for early-career physician-scientists trained in medical or surgical specialties or early-career dentist-scientists to launch careers as future leaders in aging-or geriatric-focused research.

To achieve this goal, a new GEMSSTAR funding opportunity announcement will provide small grants to conduct transdisciplinary aging research that will yield pilot data and experience for subsequent aging research projects. The GEMSSTAR program also encourages candidates to seek out a supportive research environment to achieve the program's goal of fostering the development of early-career physician- and dentist-scientists in aging- or geriatric-focused research, particularly as it applies to their clinical specialty/discipline.

In selecting GEMSSTAR awardees, NIA will consider the extent to which a candidate's environment is supportive of aging- or geriatric-focused research. Letters of intent are due October 2 and applications are due November 2.

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Continued from page 1 - Journalism Fellowships Will Highlight New Developments in Aging

Network on Generations National Coordinator Paul Kleyman, serves as senior advisor and editorial consultant.

As in previous years, half of the fellows will be selected from general-audience media and half from ethnic or other minority media outlets that serve communities within the U.S. Staff and freelance reporters and who are covering or wish to cover issues in aging are eligible to apply.

The program will commence with the fellows' participation in GSA's Annual Scientific Meeting, which in 2021 will take place from November 10 to 13 in Phoenix, Arizona, with the theme of “Disruption to Transformation: Aging in the ‘New Normal.’” There the fellows will participate in an exclusive educational workshop, which will showcase demographic trends and research highlights and include 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.

A continuously updated list of stories from the fellows is available online.
It has been a great privilege to serve as your BSS ESPO junior leader over these past two years. As my time is winding down, co-Junior Leader Kylie Meyer, PhD, and I met to discuss what’s on the horizon for work, what’s got me jazzed for the future of gerontology, and our shared passion of science communication.

**Kylie Meyer:** Can you tell us about your current research? And, you know I have to ask, what is the translational potential of your work? How will what you do in the lab reach community members?

**Briana Sprague:** I lead a series of projects that are particularly motivating to help older adults remain physically active and independent. I’ve finally reached this point where I can see a coherent story forming from my passion for older adult physical and cognitive health from undergrad to postdoc.

One of these projects was a study I did with a friend at Penn State. We were interested in how older adults felt about exergaming for fitness. We see these commercially-available products like Xbox Kinect that are thought to make exercise more palatable by gamifying it and wanted to know: do older adults actually enjoy exergaming and find it to be motivating? What good are these products if older persons don’t want to use them, right? They did not enjoy the games despite wanting to do well!

I’ve also been delving into how the central nervous system impacts mobility. In a series of JAGS papers, we focused on dopamine and subjective energy. Working on these projects pushed my thinking in new ways-how can we measure “a pep in one’s step”? Do these energizing, motivating factors relate to mobility? Excitingly, we discovered that they do (but read the full text). I was jazzed, but discovering an association is only the first step. Can we intervene on one’s motivation or energy? If you’re someone who’s coming into an intervention high on those factors, are you likelier to stick to the intervention after we “take off the training wheels” and the formal intervention ends? I’ve got some exciting collaborations to this end, so stay tuned!

In a dream world, I would find a way to deliver this information publicly, maybe through a website, for researchers and community members alike to access information about which behavioral interventions are likely to work for whom. So you could almost “shop around” for a behavioral program that fits to serve your client or patient population. As I move toward research independence, one thing I want to incorporate is at least one tangible benefit to the community per project. Too often researchers stop coming around after the research ends, and I think we should want to foster a resilient, long-term relationship with the communities we serve.

**KM:** I love that idea for a searchable website! The caregiving field did something like that with Best Practices in Caregiving, but it’s an idea that could be used for a lot of behavioral intervention areas.

**BS:** What does it mean to thrive, and how can we foster that resiliency?

**KM:** I think we’re seeing increased attention to how to live well as opposed to living without disease, not just for aging studies but for human development as a whole. I anticipate seeing more research where we ask, “What does it mean to thrive, and how can we foster that resiliency?”

One other thing I would love to see is the continued democratization of research. Twitter is bad for many things, but we have this tool to rapidly communicate research to non-academics. Not every scientist will perfectly communicate their work to lay audiences, but this is a skill that I think researchers should have in their toolkit. On this front, I would love to see The Gerontological Society of America and gerontology educational institutions support training in science communication, including writing op-eds, how to podcast/audio-visually present work, and other creative venues.

**KM:** Are there additional research topics or service commitments related to adulthood/aging that you are passionate about?

**BS:** There are! Outside of work, I am an avid pop culture consumer. It’s been fascinating to see the changing landscape as far as portrayals of older adults in the media go. For example, Diana Rigg’s portrayal in Game of Thrones showed her as capable, calculating, and cunning rather than veer into ageist stereotypes of decline and loss. For those who may not have intergenerational relationships in real life, pop culture may be the closest proximity some experience. It’s encouraging to see how our cultural assumptions about aging are changing. Service commitment-wise, I am increasingly feeling passionate about getting involved at a local level. For example, we know that early life experiences, such as quality education, can affect different aspects of aging, such as cognitive changes. Locally, I’m involved with groups that support such goals, like groups that provide health resources/aid, and that has enriched my life in a way that compliments my scholarly endeavors and reminds me of the importance of the research we do.

Now, where would you like to see your research/the field in general head in the next few years?

**BS:** I think we’re seeing increased attention to how to live well as opposed to living without disease, not just for aging studies but for human development as a whole. I anticipate seeing more research where we ask, “What does it mean to thrive, and how can we foster that resiliency?”

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Greetings, GSA members! For those of you who may already know what SPO stands for, but the rest feels a little fuzzy, we’d like to present a primer.

We are international!
Did you know that Sigma Phi Omega (SPO), THE academic honor and professional society in gerontology, is global? We would love for you to join us. We focus on honor, excellence, and service, and provide links between students, educators, administrators, and professionals.
When you become a member, you join your local chapter (there are 55 right now). If your institution doesn’t have one, you still have options. You can start a chapter with three members, you can join an adjacent chapter, or you can join the international/virtual chapter. So many ways to connect! When you join SPO, you get to network, serve the campus and community, earn awards, graduate with honors, and wear those fabulous blue and yellow cords at convocation!

Wondering if you’re eligible?
Undergraduate students with a 3.3 or higher overall GPA and graduate students with a 3.5 overall GPA who have completed at least one full term of gerontology coursework are eligible to apply. Faculty who are involved in teaching, research, or service in the field of aging in higher education also qualify for membership. Professionals with an associate’s degree at minimum who work in the aging field are eligible to apply for membership. Finally, those who have retired from faculty or professional work or who have been a continuous SPO member for 15 years are eligible for emeritus membership. Additionally, emeritus members who are former board members, chapter presidents, and chapter advisors may qualify for emeritus fellow status. We hope you will apply today!

Are you already a member?
If so, we celebrate you, commend your excellence, and thank you for your service! Wondering if your membership has expired? Log into your account, update your information if needed, and select “renewal membership.” You can pay with a credit card or with PayPal (you don’t need a PayPal account to use PayPal). A check option is still available.

Want to start a chapter at your institution?
We would love to welcome you — it’s easy:
• You need three founding members, including a faculty advisor.
• You choose a chapter name (the SPO administrative support associate can help you select a unique chapter name)

You create your chapter bylaws (you can download the chapter bylaws template here)
Apply here, upload your bylaws, and pay $120 to join. This is a one-time fee, as long as your chapter stays active.
Next, your chapter will hold your induction ceremony. We have the sample induction template on our Start a Chapter page on the website.

Did your chapter expire?
Typically, this is because the faculty advisor’s membership has expired. Simply have your faculty member reactivate their membership. Chapters stay active by having the Chapter advisor keep their membership active and maintaining at least 3 paid memberships. If you are inactive for a full year, you’ll need to pay the $120 fee again to reactivate. It’s never too late to rejoin!

What can a chapter do?
What can’t it do? Hold meetings, do service projects, recruit at campus events, hold inductions, create speaker panels or series, or participate in local aging activities. Out of ideas? Check out our Chapter News (and submit yours to help others).

What should Chapters do?
Did you know that when you file an annual chapter report (these are due each year on April 30), we send you $5 for every active member in your chapter? These are simple forms online, and they directly provide funding for your chapter. We celebrate your accomplishments and take your feedback to heart.

How does SPO celebrate chapter and individual member accomplishments?
Each spring we partner with a gerontology organization for our annual conference. At the SPO Business and Awards meeting, we announce the winners of our President’s Student Paper Award, our Service Project Award, and our Video Contest.

Some pro-tips:
• Request that your institution list SPO members in the graduation program; it’s always worth the ask!
• Add your SPO membership, service work, and leadership to your CV or resume; and add your leadership office to your email signature.
• Wear your membership pin proudly wherever you go in your professional work
• Display your membership certificate proudly in your place of work

Students who have graduated can renew their membership as a professional or a faculty member. Those in faculty and professional roles have the opportunity to mentor those more junior in experience and service. Our efforts affect others daily,

By Katarina Friberg Felsted, PhD, SPO President, University of Utah (katarina.felsted@nurs.utah.edu) and Cynthia Hancock, PhD, SPO Emeritus Fellow, UNC Charlotte, (chancock@uncc.edu)
new resources

Briefs Look at Hunger Among Older Adults

The National Council on Aging (NCOA) and the Leading Age LTSS Center @UMass Boston recently unveiled two issue briefs that underscore the long-lasting and pernicious effects of pandemic-related food insecurity among older adults, especially older women and people of color.

The research suggests that while enhancements to the Supplemental Nutrition Assistance Program (SNAP) were likely effective in temporarily decreasing pandemic-induced food insecurity among vulnerable older adults, the increased SNAP benefits provided by the American Rescue Plan must be made permanent and reflect increased food costs to overtake the growing number of older households expected to face food insecurity.

The first issue brief, “Food Insecurity Among Older Adults and the Role of the Supplemental Nutrition Assistance Program (SNAP),” highlights how the most recent recession in 2008 affected food insecurity among people over 60 and how those levels of hunger persisted even 10 year later.

The second issue brief, “The Effectiveness and Adequacy of the Supplemental Nutrition Assistance Program (SNAP) in Reducing Food Insecurity During an Economic Downturn,” shows that although SNAP is effective at reducing food insecurity and skipped meals, SNAP benefits have not kept up with the rising cost of food and there are still a substantial number of older adults who are skipping meals despite being enrolled in the program. It also underscores how the roughly $12 billion in new funding allocated to food assistance programs under the American Rescue Plan should remain in place permanently and be enhanced to reflect rising food prices.

RRF Brief Provides Insight on Bolstering Caregiver Support

RRF Foundation for Aging has released an issue brief on one of its priority funding areas — caregiving. More than 53 million people — one in five residents of the U.S. — are family caregivers who provide essential support to older adults who can no longer live independently.

Estimates suggest that the care they provide is worth nearly half a trillion dollars, an economic contribution significantly greater than all government outlays for institutional and community-based long-term services and support (LTSS) combined. This makes caregivers the nation’s largest healthcare workforce, an indispensable part of the health and social service delivery system for older adults and a vital resource for the nation.

“The Investing in Caregivers: An Essential Resource for Our Nation” provides an overview of the key issues around caregiver support, describes some of the work the foundation is funding to address these issues, and invites others to join them in developing the next generation of solutions to address this increasingly important issue.

DEC Toolkit Aims to Help Providers Support Diverse Caregivers

The Diverse Elders Coalition (DEC) has released a new resource, “Caring for Those Who Care — Resources for Providers: Meeting the Needs of Diverse Family Caregivers Toolkit.”

The toolkit offers information on what providers need to know about meeting the needs of diverse family caregivers and key pieces from DEC’s comprehensive training curriculum, “Caring For Those Who Care: Meeting the Needs of Diverse Family Caregivers.”

The toolkit includes fact sheets and diverse family caregiving resources such as information on national caregiving resources, ten things to know about language-access advocacy for older adults, and COVID-19 resources for diverse family caregivers. The toolkit was created by the six members of the DEC with funding from The John A. Hartford Foundation.

New Public Facing Website Provides Information on Alzheimer’s Disease

The National Institute on Aging (NIA) has launched a new website, www.alzheimers.gov, designed to educate and support people whose lives are touched by Alzheimer’s disease and related dementias. This is the federal government’s portal to information and resources on Alzheimer’s disease and related dementias, including Lewy body dementia, frontotemporal disorders, and vascular dementia.

The new website includes resources for community and public health workers, health care providers, and researchers; information about Alzheimer’s disease and related dementias, including causes, symptoms, diagnosis, and treatment; tips and resources for caregivers and people living with dementia; clinical trials and studies people can join to help advance ways to treat and prevent dementia; and updates on what the federal government is doing to address Alzheimer’s and related dementias.

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and this is a chance to serve and mentor. Think back to the mentors you have had, and consider how much they have affected you. All of us in the field of gerontology have the opportunity to provide memorable mentorship to those around us.

Do you have more questions?
Check out our website at sigmaphiomega.org

Do you have insights or feedback for us?
Please reach out to our administrative support associate at spogerontologymembership@gmail.com, who will pass these on to the SPO Board.

We wish you a fully vaccinated academic year with lots of fun, growth, and time with those you love most. Please take care of yourselves and each other.
**Series B Now Features Three Virtual Collections on COVID-19**

The COVID-19 pandemic has threatened the health, longevity, and financial and emotional security of millions of people in the U.S. and worldwide. The death toll has been largest among older adults, who are vulnerable not only to the virus, but to the social isolation, stigmatization, and suffering the pandemic has wrought. It is against this backdrop that the social sciences section of *The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences* has published three virtual collections featuring COVID-19 research carried out during the first six months of the pandemic.

Each of the three, focused on a distinctive theme, features an integrative essay by a GSA member. The first collection from March 2021 focuses on the U.S. and highlights “COVID-19: Trends, Disparities and Consequences for Older Adults” with an essay by past editor-in-chief Deborah Carr, PhD, FGSA. The April 2021 collection “COVID-19: Healthcare Challenges for Older Adults” is also focused primarily on the U.S. and includes introductory essay by Karen Fingerman, PhD, FGSA, and Karl Pillemer, FGSA. The September 2021 collection, “Global Perspectives on COVID-19,” features papers on Chile, China, India, Israel, Japan, Korea, Mexico, Puerto Rico, and The Netherlands, and includes an introductory essay by Danan Gu, PhD, and Qiushi Feng, PhD. These collections reveal the powerful impacts of COVID-19 on older adults and the people who care for and about them.

**Series A Publishes Special Issue on Reproductive, Biologic Aging**

The biological sciences section of *The Journals of Gerontology, Series A: Biological Sciences and Medical Sciences* has published a new special issue titled “Intersection of Reproductive and Aging Biology” guest-edited by Michal M. Masternak, PhD, FGSA, Jeffrey Mason, PhD, and Augusto Schneider, PhD. The issue highlights the work linking the health and function of female reproductive organs with the process of aging and longevity, and includes review and original research articles summarizing present knowledge and highlighting new directions for future work linking the role of reproductive aging with overall organismal aging and aging-related diseases.

This issue becomes increasingly important with the current increases in life expectancy and the fact that women live a significant period of their lives in the post-menopausal stage. Specific topics covered in this issue discuss the role of multiple aging pathways, including those involved in metabolism and nutrient sensing, like PI3K/PTEN/AKT/FOXO3, TSC/mTOR, growth hormone/IGF-1, H2S, and sirtuins, in the regulation of the primordial follicle pool in mammalian ovaries. The reviews and original papers presented provided further evidence that ovarian activity can be linked to decreases in the risk of diseases, higher quality of life and even the microbiome, highlighting that overall, female increased longevity may be associated with delayed ovarian aging.

**PP&AR Focuses on Pathways into Retirement**

The work presented in the latest issue of *Public Policy & Aging Report* (PPeAR), “Retirement Structures and Processes,” identifies the many pathways into retirement that have emerged over the past several years and are becoming formally paved as more and more Boomers reach and surpass the traditional retirement age of 65. Topics in this issue includes identification of five distinct groups of “retirees” in the U.S.; phased retirement policies in The Netherlands and the rest of Europe; racial, economic and other disparities experienced by Americans as they enter retirement that contribute to retirement insecurity; the diversity of individual retirement experiences relative to the accumulation of savings for Mexican immigrants in the U.S.; public and private efforts in Mexico and other Latin and South American countries to provide retirement savings plans and lessons to be learned for the U.S.; and perspectives on the future of the Social Security system.

**Innovation in Aging Seeks Abstracts for Issue on Nursing Science Interventions**

*Innovation in Aging* has issued a call for papers for a special issue titled “Nursing Science Interventions in Aging.” The National Institute of Nursing Research (NINR) Strategic Plan for 2022–2026 identifies three goals for nursing science: dismantling structures that perpetuate racism and impede health equity; addressing social determinants of health using multilevel methods; and advancing precision health and health care. In this call for papers, the editors seek cutting-edge nursing science research that addresses these challenges in the setting of aging and lifespan health. Manuscripts should be empirically based but may make projections for a possible future vision for the field. Abstracts are due October 1.

**The Gerontologist Welcomes Submissions for Issue on Implementation Science**

Researchers in gerontology and geriatrics have long studied the efficacy of clinical interventions, with the focus on individual adopters, but with less attention to implementation. Implementation scientists explore factors that influence adopting evidence-based interventions on a larger scale, such as characteristics of organizational, political, and cultural contexts. With significant gerontological research focused on interventions to modify the course of developmental trajectories, improve disease conditions, and promote lifestyle changes, applying implementation science can accelerate translation of effective programs and policies into practice. *The Gerontologist* invites papers for a special issue, “Implementation Science in Gerontology,” covering implementation science in aging research, education, and practice, including challenges and considerations for practitioners and researchers, innovative methods, and opportunities for training and education.

The editors welcome papers that reflect how researchers and practitioners are applying implementation science frameworks and methods across disciplines. Works by persons belonging to underrepresented groups or studying diverse and underrepresented older adults are encouraged. Successful papers will use or build upon frameworks for implementation science practice and research and, as with all papers accepted in *The Gerontologist*, demonstrate theoretical, conceptual, and methodological rigor regardless of the manuscript type. Abstracts are due October 1.
Continued from page 1 - Reframing Aging Gains Momentum in Countering Ageism

D’Antonio

Foundation, The John A. Hartford Foundation, The Retirement Research Foundation, and The SCAN Foundation. We’ve also continued to grow our base of additional support, including Endowment for Health, The Fan Fox and Leslie R. Samuels Foundation, Next50 Initiative, Rose Community Foundation, San Antonio Area Foundation, and Tufts Health Plan Foundation.

The research on which the initiative was founded was conducted by the nonprofit FrameWorks Institute, which found that the public’s perception of aging is decidedly negative and antithetical to how most older people feel and what experts in the field know to be true. FrameWorks then developed and tested strategies and tools that were found empirically to reduce implicit bias against older people, promote a sense of possibility that older age can be rewarding, and that public policies can be effective in improving well-being across the life course.

Now, we are bringing those findings and empirically-supported tools to the field of aging in the broadest sense of the term.

GN: How has the initiative grown in the past two years?

TD: We launched Caravan, our bimonthly newsletter to share information, ideas, and inspiration as we work to frame our communications. I hope our readers will sign up to receive the newsletter.

The initiative has reached more than 15,000 people through our in-person presentations, webinars, and online workshops including the Nuclear Regulatory Commission, the Federal Emergency Management Agency, Administration for Community Living, Age-Friendly Public Health Initiative, and — a first — a “micro-training” at the Department of Health and Human Services’ Healthy Aging Summit this September.

We are collaborating with the Rush University E4 Center of Excellence for Behavioral Health Disparities in Aging. Over the summer we presented a six-part series reaching more than 800 colleagues working in behavioral health and aging to help them integrate these strategies in their work.

The initiative has a team of close to 30 national Reframing Aging facilitators representing a broad experience working in the field of aging who are teaching others to become framers.

We’ve worked throughout the country to help local and regional aging organizations engage their communities in framing strategies. Organizations like Changing the Narrative in Colorado, Successfully Aging and Living in San Antonio, LiveOn NY, Tufts Health Plan Foundation, and the New Hampshire Alliance for Health Aging are working locally to restructure their communications. We’ve trained 100 facilitators for these membership partners to disseminate the reframing aging concepts throughout their organizations and networks — and beyond.

As a result of the pandemic, we developed an online, four-part intensive called the Core Elements of Reframing Aging. We’ve conducted it six times in the past year, successfully training more than 120 framers.

GN: What have been your biggest surprises as you’ve undertaken this work?

TD: I’m mostly surprised by how ageism impacts us all professionally and personally. I feel like I see, hear, and read much differently now. Recently, GSA Past President Nancy Morrow Howell shared that as we begin to internalize the concepts, they seep into all of our communication. I no longer purchase birthday cards that make fun of age. Our colleagues at Changing the Narrative have developed birthday cards that celebrate age and the joys of getting older.

GN: What aspects of the Reframing Aging Initiative do you think more people should be aware of?

TD: That this initiative is really for everyone — because we are all communicators, whether we realize it or not. We all communicate with family, friends, and colleagues so we can all be part of the solution to counteract ageist beliefs and highlight the benefits of growing older.

GN: How can individuals and organizations get involved in reframing aging?

TD: If you are interested in implementing a local strategy to implement Reframing Aging, we can work with you! Through our membership model, we will introduce key members of your community to the concepts of Reframing Aging and teach them to be good framers; provide technical assistance to help you determine a local vision for implementing Reframing Aging; and provide resources and continued learning opportunities to sustain and enhance the knowledge and practice of framers in your community.

GN: If people wanted to gain a better understanding about the importance of Reframing Aging, what resources can you point them to?

TD: To learn more, I encourage readers to visit our website, reframingaging.org. There you will find resources to get started such as our Quick Start Guide. This offers some basic ways to rethink the words you use and how you develop your communications. The website also includes links to the research reports that explain our findings, links to past webinars, and a great infographic that explains the initiative and why it’s so important that we take this on now.

GN: How does reframing aging fit into the broader age-friendly ecosystem?

TD: Age-friendly is an important unifying movement for our society. There’s a great deal of activity and passion throughout the age-friendly ecosystem. GSA’s work on Reframing Aging provides the unifying language that connects and animates the many age-friendly components of this expanding ecosystem. In a recent Next Avenue interview, Terry Fulmer, president of The John Hartford Foundation, which is a leader in the age-friendly health systems movement, highlighted how Reframing Aging is important to countering ageist attitudes.

We know that we all unintentionally communicate in ways that trigger ageist assumptions — we have to learn to choose deliberately the words and approaches to talking about aging that will be most effective at getting our points across. If people who work in age friendly systems haven’t been exposed to reframing aging language and insights, how effective will they be? Well-framed or “age friendly language” is what is needed to help us advance successfully.

By implementing the principles of Reframing Aging, all individuals in this thriving ecosystem can help the public understand that there is much we can do, together, to ensure well-being as we age.
Join more than 3,500 researchers, clinicians, educators and other professionals in the field of aging from around the world to learn and discuss the latest trends, research and key issues in the field of aging. Explore collaboration opportunities and build your network with other experts in the field.

#GSA2021

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