GSA is expanding its policy internship program this summer, with the addition of a position specifically designated for students from minority-serving institutions (MSI). Four candidates have been selected to participate this year.

Established in 2019, this professional development opportunity for emerging scholars in the aging field is now named in memory of two policy experts with a long history of service to GSA — Greg O’Neill, PhD, a longtime GSA staff member who passed away in September 2018, and Kathryn Hyer, MPP, PhD, FGSA, FAGHE, a past GSA board chair and University of South Florida professor who passed away in January 2021.

The internship program, which will be conducted in-person this year, is managed by GSA Vice President for Policy and Professional Affairs Patricia M. D’Antonio, BSPharm, MS, MBA, BCGP.

“As we honor the memory of Drs. Hyer and O’Neill, it is immensely gratifying to see how this program has grown to include four candidates with the passion and potential to carry on their legacy and make a meaningful difference in the advancement of aging policy and research,” said D’Antonio, who also acknowledged the many donors who contributed.

Continued on page 8
This May’s Older Americans Month theme is “Aging My Way.” In the academic world, May is also a time of graduations for students and transitions to new career phases for faculty — in other words, a time when people have to make active choices about how they’re going to do things “their way” moving forward.

Just as GSA’s membership studies aging across the life course, engagement with GSA is possible across the career course. Among these engagement opportunities is the GSA Visiting Scholar Program, open to members interested in committing time to conduct work on a special GSA project related to their area of expertise. The program is ideally suited for faculty transitioning to emeritus status, taking a sabbatical, or those already in retirement. The program enables individuals to continue along their chosen career course, contributing to the field, and doing it “their way.”

The Visiting Scholar Program provides members with the opportunity to advance GSA initiatives related to their professional interests; combine their research projects with GSA’s programmatic needs; view the aging research enterprise through the lens of their national membership Society; and continue to broaden their professional networks. The time commitment and duration of service varies based upon the Visiting Scholar’s interests and GSA program initiatives.

GSA currently has four visiting scholars from a variety of backgrounds. Robin A. Barr, DPhil, was the director of the Division of Extramural Activities at the National Institute on Aging within the National Institutes of Health, where he retired after 33 years. Richard Browdie, MBA, FGS, retired after 16 years as president/CEO of the Benjamin Rose Institute on Aging. Katie Maslow, MSW, FGS, our longest-serving scholar, was previously a scholar-in-residence at the Institute of Medicine. And Patricia W. “Patty” Slattum, PharmD, PhD, is a professor emeritus of pharmacotherapy and outcomes science at Virginia Commonwealth University.

Both Katie and Patty recently shared a note about their positive experiences with the program that provide good insight for anyone considering this opportunity.

“Being a GSA visiting scholar for the past six years has given me an exciting and supportive professional home where I have been able to pursue many projects in my main area of interest, which is improving care and services for people living with cognitive impairment and dementia and their family and other caregivers,” Katie said.

These projects have included co-chairing the first National Research Summit on Care, Services, and Supports for Persons with Dementia and their Caregivers in 2017, developing the first version of GSA’s KAER Toolkit, and participating in the development and ongoing updating of Best Practice Caregiving, a free source of information about effective programs for dementia family caregivers.

“I am so grateful for all the opportunities and support GSA has given me as a visiting scholar,” Katie added.

Patty expressed similar sentiments. She currently focuses on her interests in mentoring and professional development, helping to create and expand programs supporting GSA members including Career Conversations, Grant Chats, and Mentoring Consultancies. After retiring in 2019, she called the GSA Visiting Scholars Program “the perfect landing pad to engage in meaningful projects while exploring the next phase of my professional life as a gerontologist.”

“I enjoy collaborating with other gerontologists at different career stages and GSA staff members as well as the opportunity for continued professional growth and learning,” Patty said. “The program is flexible, allowing me to continue on page 10
Dassel Named to Dean’s Position
Kara Dassel, PhD, FAGHE, FGSA, FAHSE, has been appointed assistant dean for the Gerontology Interdisciplinary Program (GIP) at the University of Utah College of Nursing. She was appointed to the College of Nursing in 2013 as associate professor. From 2013 to 2017, she served as director of GIP, and since January 2021, she had been serving as the GIP’s interim assistant dean.

Under her leadership, the GIP successfully transitioned to a fully online format, fostering access to potential students. She aligned the GIP with Academy for Gerontology in Higher Education (AGHE) Gerontological Competencies for Undergraduate and Graduate Education, and achieved AGHE Program of Merit status.

Dassel’s research interests focus on Alzheimer’s disease and related dementias (ADRD), end-of-life care planning, and caregiver health outcomes.

Calkins Earns Changemaker Award
The Center for Health Design recently honored Margaret Calkins, PhD, EDAC, FGSA, with its 2022 Changemaker Award. The award honors individuals or organizations that have demonstrated exceptional ability to change the way healthcare facilities are designed and built, and whose work has a broad impact on the advancement of healthcare design.

As a visionary and advocate in advancing person-centered care, Calkins helped initiate a new paradigm for designing, building, and providing memory care. She currently serves as board chair of the IDEAS Institute. Her work focuses on researching and creating life-affirming environments for individuals living with dementia.

Kusmaul, Robinson Elected to AGESW Leadership
The Association for Gerontology Education in Social Work (AGESW) recently announced Nancy Kusmaul, PhD, MSW, FGSA, as its new president and Erin Robinson, PhD, MSW, MPH, as its vice president.

AGESW provides leadership in the areas of gerontological social work education, research, and policy, and fosters cooperation, collegiality, and an exchange of ideas among social work educators, researchers, and students interested in gerontology.

Kusmaul is an assistant professor in the Baccalaureate Social Work Program at the University of Maryland Baltimore County. Her research focuses on organizational culture, trauma informed care, and the impact of trauma experiences on the workforce. Robinson is an assistant professor of social work in the School of Health Professions at the University of Missouri. Her primary research focus is on older adult health, communication, and social support networks.

Cohen to Continue as USC Davis School Dean
Pinchas Cohen, MD, FGSA, has been reappointed dean of University of Southern California (USC) Leonard Davis School of Gerontology for another five-year term. In being considered for reappointment, he was credited his strong commitment to academic and research excellence and his collaborative and compassionate leadership, particularly during the pandemic. He also played a critical and leading role in the university-wide Public Health Policy Advisory Group that continues to help guide university decisions during the COVID-19 pandemic.

He was also credited for his focus on diversity and inclusion and his efforts to successfully grow the student body. Today, more than 600 individuals are pursuing gerontology degrees at the school, compared to 200 a decade ago. He developed new degree programs, including the first-of-their-kind Master of Science in Nutrition, Healthspan, and Longevity, a PhD in the Biology of Aging, and new research centers.

Hodgson Will Receive STTI Nursing Award
Nancy A. Hodgson, PhD, FGSA, FAAN, the Claire M. Fagin Leadership Professor in Nursing and chair of the department of biobehavioral health sciences at the University of Pennsylvania School of Nursing, will be honored by Sigma Theta Tau International (STTI) for her contributions to the nursing profession during the organization’s 33rd International Nursing Research Congress in Edinburgh, Scotland, in July.

Hodgson leads a research program focused on incorporating evidence-based findings into geriatric nursing practice to conquer challenges in palliative care such as promoting dignity, minimizing symptoms, and honoring peoples’ preferences for care at the end of life and advancing palliative dementia care. She has served as director of the University of Pennsylvania’s Hillman Scholars Program in Nursing Innovation. She is an academic research representative on the Pennsylvania Long-Term Care Council, and was recently appointed to the thirteenth cohort of the Penn Fellows Program.

Member Spotlight
GSA’s website features monthly Q&A sessions with distinguished members. The current spotlight shines on: Sarah Dys, MPA

New Books by Members
“Ageism Unmasked: Exploring Age Bias and How to End It,” by Tracey Gendron, PhD. Published by Penguin Random House, 2022.
The movement to address social isolation and loneliness has been underway for many years. In fact, the topic was the focus of GSA’s December 2017 Public Policy & Aging Report titled “Lack of Social Connectedness and its Consequences.” In addition, CEO James Appleby, BSPharm, MPH, has served as a member of the Executive Council of the AARP Foundation’s consumer-directed Connect2Affect campaign. And, in 2019, I reported on a new coalition created to convene a diverse group of allied stakeholders to address the epidemic of social isolation and loneliness.

Little did we know that the COVID-19 pandemic was going to intensify the issue of social isolation and loneliness well beyond our ability to treat it.

Fortunately, many players were already in place in March 2020 when society went into lockdown and action has been significant, including securing program authorizing language in the Older Americans Act and funding in the pandemic recovery bills. Also, the Elder Justice Reauthorization and Modernization Act of 2021 includes a significant provision creating a “Grants And Training To Support Area Agencies On Aging Or Other Community-Based Organizations To Address Social Isolation Among Vulnerable Alder Adults And People With Disabilities.”

This bill introduced by House Ways & Means Committee Chair Richard Neal, (D-MA) and Senate Finance Committee Chair Ron Wyden (D-OR) would provide $62.5 million each year for conducting outreach to individuals at risk for, or already experiencing, social isolation or loneliness, through established screening tools or other methods identified by the secretary of health and human services; developing community-based interventions for the purposes of mitigating loneliness or social isolation (including evidence-based programs developed with multi-stakeholder input for the purposes of promoting social connection, mitigating social isolation or loneliness, or preventing social isolation or loneliness) among at-risk individuals; connecting at-risk individuals with community social and clinical supports; and evaluating the effect of programs developed and implemented. These provisions were also included in the House version of the Build Back Better Act, but not the Senate bill, and may see the light of day again later this year.

Much of this work has been guided by the Coalition to End Social Isolation and Loneliness (CESIL). GSA is a founding member of CESIL, which is now also affiliated with the Foundation for Social Connection. This foundation has brought together global initiatives, federal agencies, corporate entities, and the scientific community to address social isolation and loneliness.

Recently, the Foundation for Social Connection convened 26 experts and more than 2,500 community members from 55 countries to discuss issues of social isolation in a series called Connect+Conversations produced with Social Health Labs and with support from the U.S. Administration for Community Living and AARP. (Download the full report here and read the press release.) They ask that you help spread the word by using their toolkit to share on your social platforms and e-mail channels.

In addition to this report, another resource has been developed called the Systems Of Cross-sector Integration and Action across the Lifespan (SOCIAL) Framework. The SOCIAL Framework was created by Foundation for Social Connection’s Scientific Advisory Council (SAC). The SAC is tasked with sharing research, analyzing interventions and tools, and providing expert insight on policies and initiatives being considered by CESIL. The SAC is chaired by GSA member Julianne Holt-Lunstad, PhD. The council also includes GSA members Matthew Smith, PhD, of Texas A&M University, Thomas Cudjoe, MD, MPH, of Johns Hopkins University School of Medicine, and Louise Hawkley, PhD, of NORC at the University of Chicago.

The SOCIAL Framework was developed because “Evidence has shown that various stakeholders — including researchers, policymakers, practitioners, and individuals — have struggled with addressing social isolation and loneliness in a coordinated, collaborative way. The SOCIAL Framework works to facilitate and accelerate multi-stakeholder actions to reduce social isolation and loneliness, and increase social connectedness and identify opportunities for impact and gaps for additional research and solutions.”

The Foundation for Social Connection and the Scientific Research Council have collaborated to draft the newly released health chapter, which is the first in their SOCIAL Connection Framework Report. The health chapter highlights key stakeholders, approaches, and cross cutting considerations for combating social isolation and loneliness at the individual, community, and society levels. It also includes the best graphical representation I have seen of the relationships that form our social connectedness. They are looking for input and feedback on this first chapter, so please share your thoughts with them!

Also, take a look at the breadth of the CESIL policy priorities for 2022:

• Establish a nationally coordinated response to address social isolation and loneliness: Congress should create an interagency council on social isolation and loneliness. The interagency council would be an established within the Department of Health and Human Services. The council would be tasked with specific duties, such as (1) developing a National Strategic Plan to End Social Isolation and Loneliness (or enhance...
social connectedness), (2) take action to reduce duplication among federal programs, (3) make recommendations to improve public and private programs, (4) provide professional and technical assistance to state and local governments and nonprofit organizations, (5) conduct and fund research, (6) collect and disseminate information relating to social isolation and loneliness, and (7) prepare annual reports.

- **Address a broader range of social determinants of health related to social connection**: Congress should address a broad range of social determinants of health that offer increased opportunities for social connection, such as expanding access to non-medical transportation services, address housing quality and stability, as well as increase nutrition services across Medicaid and Medicare. Congress should also explore screening for social isolation and loneliness across populations as well as support caregivers and hearing care services.

- **Direct public health funding to the states**: Direct funding to states for schools to support screening and referral services to screen for mental health and behavioral health issues, among them social isolation and loneliness.

- **Direct public health funding to local communities, including community-based non-profit organizations**: Include funding grants for community-based organizations: (1) to conduct outreach to individuals at risk for, or already experiencing social isolation or loneliness, through establishing screening tools or other methods; (2) to develop interventions for the purposes of mitigating loneliness or social isolation for the at-risk individuals; (3) to connect at-risk individuals with community social and clinical supports; and (4) to evaluate the effect of programs developed and implemented under the funding grants.

- **Invest in mental health services**: Expand access to mental health services through expanding coverage and reimbursement for a wider range of behavioral practitioners under the Medicare and Medicaid programs.

- **Direct funding for public health research on social connection, social isolation, and loneliness**: Provide resources for the Department of Health and Human Services and its subagencies to study interventions that promote social connection or address social isolation and loneliness.

- **Appropriations asks**: Fund the Administration for Community Living’s Commit to Connect initiative to continue the work of establishing a public, evidence-based, clearinghouse of interventions. Also, fund the Department of Education to expand education, awareness, and support of social-emotional learning to better prepare students to support their behavioral health needs.

- **Conduct a Government Accountability Office (GAO) study**: Congress should request a GAO study on the governmental-wide efforts to study as well as combat social isolation and loneliness and promote social connectedness.

There is also a [document that gives a fully detailed list of CESIL’s 2021-2022 policy priorities](#). By the way, CESIL is planning a Capitol Hill Day. They are developing various materials and tools, including talking points and leave-behind documents for CESIL members to use in conversations with members of Congress and/or their staff. If you are interested in participating, please let me know ASAP at brian@consumers.org. If you are interested in participating in one of CESIL’s advocacy training sessions, please contact Senior Policy Director Daneen Sekoni at dsekonij@healthsperien.com.

CESIL and others around the globe are working to implement a broad agenda to address social isolation and loneliness and GSA members are at the heart of that effort. As we move forward in the second session of the 117th Congress, we will be looking for opportunities in legislation such as the Elder Justice Act reauthorization, the mental health proposals, and in appropriations bills to make further policy and program inroads.

**Recent GSA Policy Actions**

GSA supported a chair’s letter from the Leadership Council of Aging Organizations (LCAO) in response to the Department of Homeland Security’s (DHS) Notice of Proposed Rulemaking on the Public Charge Ground of Inadmissibility. The letter expresses LCAO’s support for the rule over all and urges DHS to finalize it with our recommended changes as quickly as possible. The most significant change the letter recommends is that DHS exclude long-term institutionalization from consideration. This and other changes we recommend are focused on minimizing discrimination against older adults and people with disabilities and the chilling effect that the public charge rule continues to have on the use of public benefits.

- GSA signed onto a letter sponsored by the [Movement Advancement Project](#) and [SAGE](#) supporting the addition of demographic questions allowing for the identification of sexual minorities and transgender people in the revisions to the Medicare Current Beneficiary Survey. The letter further encourages the Centers for Medicare & Medicaid Services to begin to work to test ways to identify individuals with variations in sex characteristics (e.g. people who may identify as intersex).

- GSA signed on to a letter organized by [The Census Project](#) to the chairs and ranking members of the Senate and House Commerce, Justice, Science Appropriations Subcommittees urging their support for $2 billion in funding for the Census Bureau in FY 2023, which represents a $495 million increase over the president’s budget request ($1.505 billion) and $646 million over the agency’s FY 2022 enacted level ($1.354 million).
The Gerontologist Welcomes Submissions on Humanities and Arts

The Gerontologist is planning a special issue to be titled “Interdisciplinary Pathways: Humanities, Arts, and Gerontology.” It will explore gerontology and the humanities as fields of exchange, rather than as divided or opposing disciplines, whose close (but often unacknowledged) historical contact has created age-making across multiple cultural forms and professional practices.

While scholars of aging in the humanities adapt gerontological insights, ideas, data, and anti-ageist critiques in their work, gerontological researchers borrow from the humanities its theories, methods, futuristic speculations, and imaginative poetics. The Gerontologist invites contributions to this special issue that highlight significant interactions between gerontology and the humanities, and call attention to how and where their interdisciplinary paths have led to new ways and genres of understanding, representing, expressing, analyzing, challenging, and imagining the meanings of aging and old age.

The special issue will be led by the journal’s humanities and arts editor, Ulla Kriebenegg, PhD, of the University of Graz, and guest editors, Sally Chivers, PhD, and Stephen Katz, PhD, of Trent University.

Abstracts are due July 1, 2022.

GSA 2021 Abstract Book Posted to Innovation in Aging

The GSA 2021 Annual Scientific Meeting program abstracts can be viewed and cited in GSA's open access journal, Innovation in Aging. This includes all accepted program abstracts, including late breakers.

Series B Seeks Abstracts Related to Immigration

The social sciences section of The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences is planning a special issue titled “Immigration and Aging” to bring together the state of our knowledge about older immigrants and the impact of immigration on later-life well-being.

The journal seeks contributions that provide strong theoretical frameworks, as well as provide cultural, national, or political context as applicable to the problem under study. Studies utilizing qualitative, quantitative, or mixed methods are all welcome.

Zoya Gubernskaya, PhD, of SUNY Albany and Joseph Saenz, PhD, of the University of Southern California will serve as Guest Editors. Abstracts are due August 1.

Pandemic Took a Toll on Older Adults Serving as Unpaid Caregivers

For the millions of older Americans who take care of a loved one with major medical needs, the pandemic has posed special challenges — and the resulting feelings of stress, depression and isolation may affect how well they can perform their caregiving responsibilities, a new study suggests.

The findings highlight the importance of considering unpaid caregivers, as well as patients, when health systems, clinics and public policymakers make decisions related to the pandemic and beyond.

Published in the journal Innovation in Aging, the study uses data gathered through the National Poll on Healthy Aging (NPHA) to explore the experiences of people between the ages of 50 and 80 who provide unpaid care for an adult relative or friend with a chronic illness or disability.

Though the poll was taken in mid-2020, the findings have implications during the current surge of COVID-19 cases across the country, and beyond, says Amanda Leggett, PhD, first author and a research assistant professor in the Department of Psychiatry at Michigan Medicine, the University of Michigan's academic medical center.

Leggett and colleagues are also conducting ongoing studies of the pandemic-era experiences of family caregivers for people with dementia, and people who have been hospitalized for COVID-19 at Michigan Medicine.

“We’re finding in this new study, and in our other work, that caregivers across the board have really struggled during the pandemic with getting appointments for the person they care for, and with policies that governed whether they were allowed to be present during an appointment or a hospitalization for the person they care for,” Leggett said. “These results show that caregivers who experienced challenges related to access to medical care for the person they care for were especially more likely to have negative mental health symptoms and worse well-being.”

She continued, “Other research has shown that a stressed caregiver is a major predictor of rehospitalization and emergency visits for the patient. Stressed caregivers are less effective in the vital role that they play in the patient’s life.”

The new study shows that 60 percent of the 311 caregivers surveyed had experienced at least one of five challenges that the study team asked about, and 23 percent reported experiencing at least two of these challenges.

The poll asked caregivers if they had experienced challenges related to getting medical care for the person they take care of, getting support services from professionals, getting support from family or friends, understanding public health guidelines, or reducing the amount of care they gave to prevent the spread of coronavirus to the person they support.

The poll also asked caregivers if they had received an increase in support from family and friends, which only 18 percent had. Asked another way, 21 percent said they had experienced a decrease in support from family and friends during the early phase of the pandemic.

In general, experiencing these challenges and lack of supports was associated with the caregivers’ level of feeling stressed, their symptoms of depression and difficulties with interpersonal interactions that they reported on other poll questions.

Half of the caregivers surveyed said they felt isolated, and 20 percent had a score on a brief mental health questionnaire suggesting they had signs of depression or had lost pleasure in activities they once enjoyed.

Nearly 59 percent of the caregivers in the study were female, and 65 percent were between the ages of 50 and 64. Just over 69
percent were white, 8 percent were Black, 15 percent reported Hispanic heritage, and 7 percent were from other racial/ethnic backgrounds or multiple backgrounds.

Leggett worked with the U-M Biosocial Methods Collaborative team and the NPHA team to develop the questions in the poll.

She noted that as the pandemic continues, and as the role of unpaid caregivers gains attention in society and in public policy, it’s important to note the specific role of in-person interactions between caregivers and clinicians. This is especially true during a patient’s hospital stay as a form of training for providing at-home care.

“Caregivers often learn how to provide post-hospital care at the patient’s bedside from nurses and others, so if they aren’t able to be at the bedside, they won’t know what’s going on and that will make the transition to home more difficult,” she explained. “You think you’re out of the woods getting out of the hospital, especially for someone with COVID-19, but it’s not the case.”

She also noted that public health guidelines aimed at reducing the spread of coronavirus need to more specifically address how unpaid family caregivers can continue to provide care safely, especially if they don’t live with the patient or they work outside the home in addition to providing caregiving at home.

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The Emerging Scholar and Professional Organization includes all student and transitional members of GSA.

Our current ESPO International Task Force (ESPO ITF) comprises four members, among which three of us have been serving on the task force for almost two years.

The task force lead is Rita Xiaochen Hu, a doctoral candidate in developmental psychology and social work at the University of Michigan. Our co-leads are Athena Chan, a doctoral candidate in family social science at the University of Minnesota, and Eunyoung Choi, a doctoral candidate in gerontology at the University of Southern California.

Our past task force lead, Emily Lim, a doctoral candidate in Gerontology at the University of Massachusetts Boston, is supporting us as a task force member. The task force has three main projects: the peer-to-peer GSA abstract review, the peer-mentorship program (pilot), and the ESPO ITF informal chat during the GSA Annual Scientific Meeting.

If you are interested in learning more about our projects, please reach out to Rita at rxhu@umich.edu.

Peer-to-Peer GSA Abstract Review

ESPO ITF organizes a volunteer-based abstract review program for international ESPO members whose native language is not English—an opportunity to receive additional feedback on their abstracts before the official call for abstracts deadline in March. This year we had a great turnout of both volunteers and members. Please stay tuned for this opportunity next year in early February.

Peer Mentorship Program (Pilot)

We are launching the pilot of the ESPO ITF peer mentorship program this year for our fellow emerging international students and scholars within the GSA community. Our peer mentorship program aims to 1) form a supportive community, 2) share knowledge on gerontology-related research, and 3) promote international and interdisciplinary collaborations.

Our mentoring program is different from GSA Connect as we will intentionally create and facilitate mentoring relationships, particularly for international fellows.

The Emerging International Students and Scholars Peer Mentoring Program will match mentors and mentees based on overall compatibility assessed through a brief questionnaire and application. The International Task Force will provide a platform for mentor-mentee pairs to meet, facilitate meetings and provide resources to promote effective communication and exchanges and help to promote positive, engaging, and mutually beneficial mentorship.

We welcome all GSA ESPO international students and scholars who are either studying or working in an institution within the U.S. or studying or working in an institution in other countries outside of the U.S.

Participants are required to be committed to the program for a year. Interested parties will have the option to select their preference of becoming either a mentor or mentee. This new peer mentor program is the first of its kind, and will be offered as a pilot program, wherein we will assess the success of the program and the potential for broader implementation and sustainability. This year, we will accept 20 participants to form 10 pairs of mentor-mentee relationships. Please stay tuned for our promotional materials later in the year. We look forward to your participation!

ESPO ITF Informal Chat

ESPO ITF will host an informal chat during the Annual Scientific Meeting. The informal chat aims to facilitate peer and intergenerational networking among international students and scholars with similar interests. In the past, we talked about self-care during COVID, challenges and opportunities in the job market, and funding opportunities for international students and scholars. Please keep an eye out for our informal chat this year’s conference program.
Continued from page 1 - RAI Videos Advance Solutions for Talking about Aging

Lindberg. “After all, later life is an important time for work, play, complete story of aging,” said RAI Program Manager Laurie G. and to spark interest in learning more about how to tell a more newsletter alternatives to advance. The website also houses the bimonthly guide, the overview brief The Story of Reframing Aging, RAI website, including the new Communication Best Practices guide,  the overview brief The Story of Reframing Aging, and a Quick Start Guide with tips on themes to avoid and conceptual models, and key insights from perspectives of the participating centers programs. Applications are due May 13.

NIA Seeks New Claude Pepper Coordinating Center

The National Institute on Aging (NIA) seeks applications for the Coordinating Center (CC) of the Claude D. Pepper Older Americans Independence Centers (OAIC) program. The CC serves as a facilitator for OAIC site interactions and as a conduit for translating OAIC objectives and findings to both scientific and general audiences. The proposed CC must demonstrate an ability to work cooperatively with all OAIC sites and possess sufficient scientific expertise in geriatrics and related areas to serve the national coordination functions of the OAIC program. The CC should be proposed only by institutions with the ability to coordinate multi-site projects as demonstrated by previous U.S. Department of Health and Human Services funding for a coordinating center of a multi-site research grant, and demonstrated scientific expertise in clinical aging research. The application deadline is May 16.

NIH Katz Awards Offered for Those with a Change in Research Direction

The National Institutes of Health (NIH) has posted two opportunities for the Stephen I. Katz Early Stage Investigator Research Project Grant, which supports an innovative project that represents a change in research direction for an early stage investigator and for which no preliminary data exist.

Applications submitted to this funding opportunity announcement must not include preliminary data. Applications must include a separate attachment describing the change in research direction. The proposed project must be related to the programmatic interests of one or more of the participating NIH institutes and centers based on their scientific missions.

1. Stephen I. Katz Early Stage Investigator Research Project Grant (R01 Clinical Trial Not Allowed)
2. Stephen I. Katz Early Stage Investigator Research Project Grant (R01 Basic Experimental Studies with Humans Required)

The next available application due date is May 26. Several other due dates thereafter are available.

Three NIA Small Grant Opportunities will Support Alzheimer’s Research

The National Institute on Aging (NIA) Small Research Grant Program for the Next Generation of Researchers in Alzheimer’s Disease supports important and innovative research in areas in which more scientific investigation is needed to improve the prevention, diagnosis, treatment and care for Alzheimer’s disease and related dementias (AD/ADRD).

Awards are two years of funding totaling $200,000, and the application deadlines are June 16 and October 16. The expiration date for this award is November 17.

There are three funding opportunity announcements:

- PAS-19-391 Area of Focus Archiving and Leveraging Existing Data Sets for Analyses (R03 Clinical Trial Not Allowed)
- PAS-19-392 Area of Focus Basic Science (R03 Clinical Trials Not Allowed)
- PAS-19-393 Area of Focus Systems Biology (R03 Clinical Trial Not Allowed)

Research Organizations collaborative. The member organizations are AARP, American Federation for Aging Research, American Geriatrics Society, American Society on Aging, Grantmakers in Aging, GSA, LeadingAge, National Council on Aging, National Hispanic Council on Aging, and USAsAging.

Support for the initiative comes from The John A. Hartford Foundation, Archstone Foundation, RRF Foundation for Aging, and The SCAN Foundation. Additional support is provided by E4 Center of Excellence for Behavioral Health Disparities in Aging, Endowment for Health New Hampshire, Fan Fox and Leslie R. Samuels Foundation, NextFifty Initiative, Point32Health Foundation, and San Antonio Area Foundation.
I have been a student at the University of Indianapolis (UIndy) for the past five years, pursuing a dual degree in the Master of Aging Studies and Doctor of Health Science programs. I am a registered dietitian (RD) who works from home, managing 20 registered dietitians who are spread all over the country! They counsel patients who have multiple chronic conditions such as high blood pressure, diabetes, heart disease, and high cholesterol via a telehealth portal with a company called Vida. We do fantastic work and have begun to publish our findings to demonstrate what we are achieving.

My educational background includes a bachelor's degree in English and journalism, earned in 1993, and a second-career student graduate certificate from Mount Mary University in Wisconsin in dietetics in 2007. I originally planned to become a diabetes educator, but instead, I was employed by a Program for All-Inclusive Care for the Elderly (PACE) and fell in love with making home visits to older adults to solve their nutrition concerns. I never looked back.

I had completed all my coursework toward a master's in nutrition at Mount Mary University, but I could not complete the thesis due to my husband’s illness. Several years after my husband passed, I looked for another program, this time online, to pursue a master’s degree in gerontology. I found UIndy and fell in love with the organization of the program and admissions process! I desperately wanted my master’s degree, not just for myself, strangely enough, but because I knew how happy and proud it would make my father.

After attending and completing most of the courses in the aging studies program, I decided to complete the dual degree — combining my aging studies degree with a doctorate in health science — because it seemed as if it were a natural progression for me, and I knew my father would love calling me “Dr. Cam.” I adore school and learning, and UIndy makes it, well, not easy, but uncomplicated, by having supportive educators and staff as well as a curriculum that is well planned. The new learning management system, the fabulous library staff, and yearly orientations for the doctoral program make attending UIndy and completing courses interesting and fun.

I cannot believe all that I have left to do after this semester is my health sciences dissertation. The variety of learning activities, the support, and the open-door policies at UIndy have made these last five years fly by! My most impactful learning experiences in the program thus far have been collaborating with the different educators in both the aging and doctoral programs. I cannot say enough about how hard they work to ensure we, as students, learn all that we can. My only regret is that my father passed away at the beginning of the pandemic, so he will miss seeing me graduate. I know he will be there in spirit.

After I complete my dual degree, I hope to continue to grow with my current company, Vida. As I mentioned, we are doing amazing things in the telehealth field, especially in diabetes care, which is part of what I am focusing on for my dissertation research. My dissertation research is a qualitative study seeking to learn more about the experiences of older adults with type 2 diabetes who use insulin pumps. I would love to complete qualitative research about coping mechanisms for people with type 2 diabetes, especially older adults, as this is not a well-researched area.

My research passion is to add to the body of literature about older adults and diabetes, seeing that the literature I have found is woefully inadequate, though it is growing bit by bit as the population is aging. We will see how my dissertation goes first, though! Other areas of research interest include quality of life for older adults with either Type 1 or Type 2 diabetes in various settings, from home to skilled care.
FrameWorks Brief on Nursing Home Care Follows NASEM Report

In April, the National Academies of Sciences, Engineering, and Medicine (NASEM) published its long-awaited report, “Imperative to Improve Nursing Home Quality: Honoring Our Commitment to Residents, Families, and Staff.” It stresses the need for immediate action to initiate fundamental change in the quality of nursing home care.

The FrameWorks Institute, with support from The John A. Hartford Foundation, has provided one data-driven step toward a better conversation about nursing homes. This brief, “Communicating about Nursing Home Care: Findings and Emerging Recommendations,” outlines preliminary findings on how members of the public think and reason about nursing homes. Each of the brief’s six key findings come with recommended communications strategies to move public thinking toward a more realistic and optimistic view of nursing home care — including the potential for lifesaving structural changes in how nursing homes exist and operate.

Report Highlights Discrimination’s Role in Health Care

Racial and ethnic discrimination in the U.S. health care system is taking a toll on the health of older Americans and preventing them from getting needed care, according to a new Commonwealth Fund report.

The report finds that one in four Black and Latinx/Hispanic adults age 60 and older have reported experiences of discrimination from health professionals, who either treated them unfairly or did not take their health concerns seriously because of their race or ethnicity. More than a quarter (27 percent) of older adults who reported experiencing discrimination said they did not get the care they felt they needed as a result.

The authors also find that older adults who report health care discrimination are more likely to have worse health, face economic hardships, and be more dissatisfied with their care than those who have not experienced discrimination.

The report, “How Discrimination in Health Care Affects Older Americans, and What Health Systems and Providers Can Do,” offers unique insights about the consequences of perceived health care discrimination for older adults, who tend to use more health services than younger populations.

As these examples illustrate, the GSA Visiting Scholar Program provides the opportunity to stay involved in the field at the national level and continue advancing meaningful projects, your way. To learn more about becoming a GSA Visiting Scholar, please peruse the information available on the GSA website or email me at jappleby@geron.org.

Continued from page 1 - Internship Program Continues Growth, Welcomes Students from MSIs

to GSA in support of the internship program.

This summer, GSA will welcome:

• Lilian Azer from the University of California, Riverside, who is pursuing a PhD in psychology: cognition and cognitive neuroscience;

• Eileen Flores from Penn State College of Medicine, who is in the dissertation phase of seeking a doctorate in public health;

• Danielle Llaneza from the University of Houston, who is a doctoral student pursuing a PhD in counseling and health psychology; and

• Hanamori Skoblow from the University of Missouri, who is working towards a doctorate in human development and family science.

Continued from page 2 - GSA Visiting Scholar Program Provides New Path for Career Gerontologists

As these examples illustrate, the GSA Visiting Scholar Program provides the opportunity to stay involved in the field at the national level and continue advancing meaningful projects, your way. To learn more about becoming a GSA Visiting Scholar, please peruse the information available on the GSA website or email me at jappleby@geron.org.
Unrestricted gifts to the annual GSA Innovation Fund: The Generativity Effect, will help:

- Strengthen the Visiting Scholar program
- Fund important skills development webinars
- Support the GSA on Aging podcast series
- Advance GSA’s Careers in Aging Week
- Provide networking events for members

All donations to the GSA Innovation Fund are tax-deductible.
Join the Gerontological Society of America and more than 3,700 professionals in the field of aging from around the world as we gather in-person for GSA 2022. Learn the latest trends, research, and developments from industry leaders, build strategic partnerships to address aging challenges, and network with peers!

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