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Referring Members Has Perks!

Announcing GSA's new Member Referral Program: Recruit a new GSA member and be entered into a monthly drawing for a \$25 Amazon gift card! Each recruit qualifies you for an entry in the drawing. Recruit one new member, get one entry in the drawing; recruit three new members, get three entries. It's easy — we created a toolkit to help you!

Refer a colleague, student or graduate to GSA and connect them to leading scholars who inspired, supported and mentored you.

Join a GSA Interest Group

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

JOIN THE CONVERSATION

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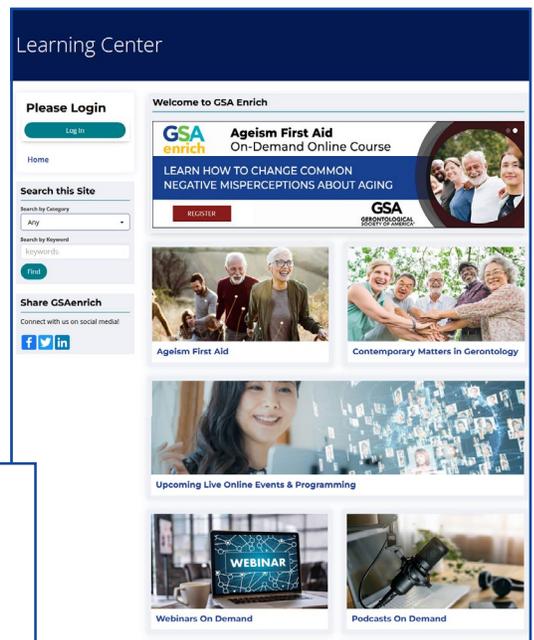
Engage with GSA on social media!

GSA Introduces New Logo and Digital Presence

A message from GSA headquarters to all members:

GSA has introduced a new organizational logo, website, and learning management system reflecting our positive outlook on aging across the life course, and our commitment to catalyzing interdisciplinary research and collaboration in the aging field.

The new logo is centered on "GSA," the conventional manner of referring to the Gerontological Society of America. Providing an instantly recognizable and memorable image for all, the design includes intertwining letters to reflect the connection and interdisciplinary collaboration of our multidisciplinary, diverse membership, while the colors illustrate positivity, wisdom, growth, and hopefulness.



Continued on page 9

Duke Han Chosen as GSA's Next Psychological Sciences Editor

GSA has named S. Duke Han, PhD, ABPP-CN, of the University of Southern California as the next editor-in-chief of the psychological sciences section of *The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences*, effective January 2024.

"I am truly honored to serve in the role of editor-in-chief for this peer-reviewed publication, which has become one of the most prestigious journals in the world given the importance of psychological issues in aging," Han said. "The preeminence of the journal has grown immensely due to the herculean efforts of its previous editors and contributors, and I look forward to working alongside the editorial board and staff to continue the journal's growth into the



Han

Its psychological sciences section publishes peer-reviewed articles on development in adulthood and old age that advance the psychological science of aging processes and outcomes. These studies have clear implications for theoretical or methodological innovation in the psychology of aging or contribute significantly to the empirical understanding of psychological processes and aging.

future with a mindset towards interdisciplinary, innovative, and inclusive approaches."

The Journals of Gerontology, Series B is published by Oxford Journals on behalf of GSA.

Continued on page 8

From the GSA President



Members Contribute to, and Benefit from, GSA's Collective Weight

By James F. Nelson, PhD, FGSA • nelsonj@uthscsa.edu

A Promising Meeting Mirrors GSA's Promising Outlook

In writing my final column as president, I found myself thinking I could have produced many more, thanks to GSA being a Society as diverse in its scope as it is agile in its service. Staying true to the tripartite format that characterized my previous columns, I will focus on three key subjects.

Our Annual Scientific Meeting

Excitement is mounting as GSA staff and volunteers shift into high gear in preparation for our Annual Scientific Meeting, scheduled for November 8 to 12 in Tampa. I am delighted to report that all indications point to an intellectually stimulating event filled with our members' discoveries spanning the geroscience spectrum.

The meeting promises ample opportunities for networking and those wonderfully serendipitous face-to-face interactions with both old friends and new acquaintances — a poignant reminder of our good fortune in being able to meet in person. We have exceeded expectations with a surge in abstract submissions, both during the initial submission period and the late-breaking opportunity to submit posters and papers.

Furthermore, a robust offering of symposia, posters, and workshops awaits attendees. In a significant change, workshops will be available at no cost to registrants, a testament to GSA's commitment to enhanced accessibility as we continue to uphold our pledge to foster greater diversity, equity, inclusion, and accessibility.

In another first, and as part of our dedication to inclusivity, GSA is extending free registration to undergraduate students during the last two days of the meeting, accompanied by special programs to introduce them to the field and make their experience less overwhelming.

Promoting Generativity

Emblematic of GSA's agility and responsiveness to opportunities and challenges, our Board of Directors has begun dedicating more time to generativity, holding brainstorming sessions at each meeting to address new issues.

One recent example, expertly led by board member Marie Boltz, is generating ways to better serve our emerging scholars — whether they are undergraduates, graduate students, postdoctoral fellows, or early-career investigators — and integrate them more fully into all societal activities. After all, our emerging scholars represent GSA's future, constituting our most valuable asset to ensure that our collective strength and wisdom will continue to meet the evolving needs, opportunities, and challenges for enhancing the meaningfulness of our lives as we grow older. Interestingly, one of our GSA fellows, Jordan P. Lewis, is establishing a Generativity Interest Group!

Empowering All Ages

I conclude this column by addressing the final component of this year's meeting theme, "Building Bridges > Catalyzing Research > Empowering All Ages," reflecting on the unique opportunities that our gathering in Tampa offers for fulfilling it. In fact, I would argue that our meeting is advancing empowerment and inclusivity more effectively than it might have if it was in a state with a more progressive and inclusive government. For more details on the numerous steps GSA has taken to promote inclusiveness and accessibility both now and, in the future, I encourage you to visit the meeting website.

Let me reiterate: Tampa may be in Florida, but Tampa is not Florida. Come to Tampa and experience this city and its people for yourself. During the opening session, you will be uplifted by a welcome from Tampa's progressive lesbian mayor. Our keynote speaker, Frank Bruni, the first openly gay columnist of *The New York Times*, will inspire us with his personal story of resilience, along with the stories of countless others who have overcome significant challenges — beautifully chronicled in his latest book, "The Beauty of Dusk."

The arc of justice is on our side, and we are its catalyst. The longevity dividend is real, and you, the members of GSA, are instrumental in making it accessible to more of us through your dedicated work. See you in Tampa!

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In Memoriam



Valle

Ramón "Ray" Valle, PhD, passed away on August 6. He was a professor of social work at San Diego State University for more than three decades, and he taught many of the practicing social workers in San Diego today. He started his studies at Loyola Marymount University in Los Angeles and finished his Ph.D. at the University of Southern California, where he studied Latino gangs. His recent work involved studying culture, especially how culture affected dementia services for the Latino population.



Harley

Calvin Harley, PhD, passed away on August 8 at age 71. He was the co-founder, chief scientific officer, and president of Telomere Diagnostics, a molecular diagnostics company focused on leveraging telomere biology for health monitoring, disease risk, and drug response. He previously served as chief scientific officer and vice president of research for the Geron Corporation (1994 to 2009), where he and his team successfully cloned the critical components of human telomerase and moved drugs based on telomerase into clinical

trials. He published extensively on medical applications for telomere research, and was an inventor on foundational patents related to telomere biology, telomerase, aging, and the diagnosis and treatment of disease.



Hudson

Robert B. Hudson III, PhD, FGSA, passed away on August 30. He was a professor and chair of the Department of Social Policy at the Boston University School of Social Work. His research centered on the politics and policies of aging. For more than a decade, he served as editor-in-chief of GSA's *Public Policy & Aging Report*. He also was chair of GSA's Social Research, Policy, and Practice Section in 1989 and earned GSA's Donald P. Kent Award in 1996.

Hudson additionally received the Arthur S. Flemming Award from the National Association of State Units on Aging in 1995. He authored the book "The New Politics of Old Age Policy." He was a member of the National Academy of Social Insurance, and chaired its John A. Heinz Dissertation Award Committee.



Schulz

James H. Schulz, PhD, FGSA, FAGHE, who served as GSA president in 1982, passed away on September 3. He began his academic career at the University of New Hampshire, transitioning to serve 30+ years at the Heller School for Social Policy and Management at Brandeis University, where he was a professor emeritus of economics.

His research focused on the economics of aging, including Social Security, pensions, retirement policies, and older worker employment issues. He was the author of "The Economics of Aging, Seventh Edition," and co-author (with past GSA President Robert Binstock, PhD, FGSA) of "Aging Nation: The Economics and Politics of Growing Older in America."

He also served as a mentor to many students; alumni of the Heller School established the James Schulz Dissertation Fund in his honor.

Schulz was the 1983 recipient of GSA's Robert W. Kleemeier Award.

New Books by Members

- "Social Aspects of Aging in Indigenous Communities," edited by Jordan P. Lewis, PhD, FGSA, and Tuula Heinonen, PhD. Published by Oxford University Press, 2023.

Members in the News

- On August 10, Jennifer Ailshire, PhD, FGSA, was quoted in a *USA Today* story titled "[Are some candidates too old to be running for president? How age will play a role in the 2024 campaign.](#)"
- Caleb Finch, PhD, FGSA, was quoted in an August 14 CNN story titled "[Living with air pollution, especially from wildfires or agriculture, raises risk of dementia, US study finds.](#)"
- U.S. News & World Report published an August 21 story titled "[More Americans Grow Old Alone, and Faltering Minds Bring Risks,](#)" which quoted Kathleen Wilber, PhD, FGSA.

Member Spotlight

GSA's website features monthly Q&A sessions with distinguished members.

The current spotlight shines on:

[Tamara Baker, PhD, FGSA](#)

Member Referral Program

This month's \$25 Amazon gift certificate winner:

[Rona Karasik, PhD, FGSA, FAGHE](#)

The recipient, who became eligible after referring new member [Vivian Bonney, MS](#) was randomly selected using [randomizer.org](#).

For more details on the Colleague Connection promotion visit [www.geron.org/connection](#).

Congress Avoids Government Shutdown Following Negotiations

Editor's note: This article was submitted shortly before House Speaker Kevin MacCarthy brought a “clean” continuing resolution to the House floor. It was passed by the House and then the Senate and signed by President Joe Biden. These actions averted a widely expected government shutdown. The article that follows explains the congressional actions that brought us to that point.

To paraphrase James Carville, “It’s the speaker, stupid.” Yes, my hypothesis is that Speaker of the House Kevin McCarthy controls this whole federal government shutdown thing and its impact on the nation and the economy. Simply put, it has been in his power to prevent the shutdown and now to end it.

At this time of year, it is my custom to report on funding that has been appropriated by Congress for federal agencies and the health and aging programs that affect us, our work, and older adults. This is because the federal budget’s year runs from October 1 to September 30 and the fiscal year (FY) 2024 spending bills should have been passed by Sept 30.

This year, funding for the federal government is up in the air due to the inability of the House of Representatives to pass the requisite appropriations legislation to fund the government. The Senate Appropriations Committee passed its 12 appropriations bills before the August recess and stands ready to move forward with those bills in an omnibus package or several mini-bus packages. Senator Patty Murray (D-WA), chair of the Senate Committee on Appropriations, and Senator Susan Collins (R-ME), vice chair, crafted bipartisan support for each bill using the levels agreed to in the McCarthy-Biden deal (see the Fiscal Responsibility Act, below).

And now I will pause for emphasis and provide the following quotes to underscore how special (and, unfortunately, unique) this accomplishment is.

Senator Lisa Murkowski (R-AK), Ranking Member of the Subcommittee on Interior, Environment, and Related Agencies: “I think we all recognize the extraordinary work that you have put into this along with your vice chair on this committee. It is exceptional. I think it’s historic, and it is certainly worthy of applause. By choosing to move the committee through this very specific and directed process — basically: regular order, marking up bills — you’ve given us ... the chance and the opportunity to give input to a product. This is what we’re supposed to be doing here.”

Senate Majority Leader Chuck Schumer (D-NY): “We have 12 appropriations bills that have been reported out of committee, a feat unheard of. I give a great deal of credit to Patty Murray and Senator Susan Collins. This is a divided country. You say our politics are divided, and you had 12 appropriations bills passed in a bipartisan way out of the committee. Incredible.”

You may recall that this year there was hope that the entire appropriations process was going to be different. In the Fiscal Responsibility Act, which was passed in June 2023, the agreement

struck between Biden and McCarthy consisted of raising the debt ceiling until January 2025 in exchange for capping federal spending at fiscal year 2023 levels in FY 2024 and allowing an only one percent increase in spending in FY 2025. In addition, you will recall that one of the concessions McCarthy supposedly had to make in order to win the speakership was a promise to pass each appropriations bill individually and not resort to a continuing resolution (CR) or an “omnibus” compilation of several bills.

Early in the appropriations process on the House side, Republican lawmakers presaged the current discrepancy between the Senate and House bills with their interpretation of the McCarthy-Biden fiscal deal. House Appropriations Chair Kay Granger (R-TX) (supported by McCarthy) said that “the debt ceiling bill set a ceiling, not a floor, for fiscal year 2024 bills.” The agreement had set flat funding for FY 2024 nondefense discretionary spending which already means a cut, due to inflation. According to the Center for Budget and Policy Priorities, “a freeze at 2023 levels means a roughly 5.1 percent loss in purchasing power in 2024 for the programs, services, and assistance” such as health care, scientific research (National Institutes of Health, Centers for Disease Control and Prevention, National Science Foundation), education, environmental issues (Environmental Protection Agency), housing, Special Supplemental Nutrition Program for Women, Infants, and Children, law enforcement (FBI), and other programs that are funded through the appropriations process. Suffice it to say, many members of Congress, administration officials, and advocates for hundreds of federal programs considered Ganger’s actions and the bills passed by the House Appropriations Subcommittees an affront to the process, the debt limit agreement, and the compromises and sacrifices that it included.

The period since the House Appropriations Committee passed its bills has not been pleasant. The cuts were insufficient for the conservative Freedom Caucus (who also hated the debt limit agreement) and threats of a motion to vacate have been made to the speaker if he does not comply with their demands. This has led to a near stalemate on the House floor. The proposals that the conservatives want are difficult to pass in the House and impossible to pass in the Senate. This leaves the speaker with several options: pass bills that will not pass the Senate, work with moderate Republicans and Democrats to pass a bill and face the possibility of a vote on retaining the speakership or wait and see if a majority of House members are able to secure support for a bill through the parliamentary procedure called a discharge petition.

On the other side of the Capitol, September 26, the Senate voted 77 to 19 to advance a CR to fund the federal government until November 17 and provide approximately \$6.15 billion in funding for Ukraine and \$5.99 billion in disaster assistance. The legislation would also temporarily extend the expiring authority of the Federal Aviation Administration. The House has rejected that approach to

date. According to [The Hill](#), Senate Minority Leader Mitch McConnell (R-KY) urged his Republican colleagues to pass the funding measure to dodge a shutdown that would only be “bad news” for his party.

Effects of a government shutdown can be far-reaching, depending on the length of the shutdown. According to the [Joint Economic Committee](#), more than 80 percent of federal workers live and work outside the D.C. area, meaning that local economies across the country would be harmed by federal worker furloughs. A prolonged shutdown could mean multiple missed paychecks and strained household budgets for these workers.

The Congressional Budget Office estimated that the five-week partial government shutdown in 2018-2019 [reduced](#) economic output by \$11 billion in the following two quarters—including \$3 billion that the U.S. economy never regained. Moody’s Analytics estimated that the 2013 full government shutdown [reduced](#) GDP growth by \$20 billion. Clearly, a government shutdown is profoundly unsettling.

A government shutdown would not affect Medicare, Social Security, veterans’ benefits, disability payments, Medicaid, or the U.S. Postal Service because these programs are not funded through the yearly appropriations process. However, the Social Security Administration would furlough about 8,500 of its nearly 62,000 workers, according to the agency’s contingency plan. One area that would feel the impact of a shutdown and, further, the impact of spending cuts, is nutrition and anti-hunger programs. A government shutdown and cuts in federal funding would be a double blow to the programs already facing challenges due to the rising costs of food prices, gasoline, and meal delivery.

At a White House Briefing on the impacts of an “Extreme Republican Shutdown” on September 28, the administration “emphasized the unnecessary nature of the impending government shutdown caused by extreme House Republicans who are not upholding their side of the deal.”

Back to my opening, it seems to me that the drama comes down to one person: McCarthy. As a House leader, he could come up with a compromise package that is close enough to the Senate CR proposal and acceptable to House Democrats and many House Republicans. If he does that, he risks losing the support of the Republican extremists in the House who could make good on their threat to depose him as speaker. Yet, there is no obvious replacement or a member who could secure 218 votes unless the Democrats crafted an opportunity to play the role of powerbroker.

In closing, let me remind you of the funding possibilities if Congress uses the bills it has already passed out of committee:

- The Senate bill provides \$117.0 billion in discretionary funding for the Department of Health and Human Services, including \$47.8 billion for the National Institutes of Health, a \$943 million increase in discretionary funding over FY 2023.
- The House Labor, Health and Human Services, Education, and Related Agencies bill provides \$103.3 billion to the Department of Health and Human Services, which is \$14 billion (12 percent) below the FY 2023 enacted level and \$25.9

billion below the president’s budget request. It provides \$43 billion to the National Institutes of Health, which is \$3.8 billion below the FY 2023 enacted level.

- The Senate bill would also provide \$1.5 billion for the Advanced Research Projects Agency for Health (ARPA-H) and provides *increases* of \$100 million for mental health research, \$100 million for Alzheimer’s disease research, \$60 million for cancer research, \$20 million for opioid research, \$12 million for a new palliative care research program, and \$10 million for diabetes research.

Both the House Appropriations Committee funding levels for FY 2024 [bill summary](#) and the Senate Appropriations Committee funding levels for FY 2024 [bill summary](#) are available online.

Recent GSA Policy Actions

GSA Vice President of Policy and Professional Affairs Patricia M. “Trish” D’Antonio, BSPHarm, MS, MBA, BCGP, represented the Society in a stakeholder roundtable with the [Agency for Healthcare Research and Quality](#) (AHRQ). Approximately 40 multidisciplinary experts, including several GSA members, discussed how AHRQ can impact the research, dissemination, and implementation of evidence to improve the organization and delivery of healthcare with the goal of optimizing the health, functional status, and well-being of the U.S. population as it ages. AHRQ recently summarized the outcomes in “[Optimizing Health and Function as We Age Roundtable Report](#).”

GSA served as a [Malnutrition Awareness Week 2023 Ambassador](#) in the fight against malnutrition. Malnutrition Awareness Week is an annual, multi-organizational campaign created by the American Society for Parental and Enteral Nutrition to educate healthcare professionals about the early detection and treatment of malnutrition, educate consumers/patients on the importance of discussing their nutrition status with healthcare professionals, and increase awareness of nutrition’s role on a patient’s recovery. This year’s Malnutrition Awareness Week took place from September 18 to 22.

GSA supported a letter from the [Adult Vaccine Access Coalition](#) (AVAC). The letter thanks Centers for Disease Control and Prevention (CDC) leadership following recent clarification on the “[Morbidity and Mortality Weekly Report](#)” (MMWR) publication. The clarified policy guarantees that new Advisory Committee on Immunization Practices vaccine recommendations will be adopted by the CDC director when an official statement is posted on the CDC’s website. Previously, recommendations were not considered official until they were both approved by the CDC Director and published in the CDC’s MMWR, which at times resulted in delays in insurance coverage and provider uptake. The letter also acknowledges the Centers for Medicare and Medicaid Services (CMS) for revising guidance that aligns the effective date of the \$0 cost-sharing requirement for applicable vaccinations. GSA applauds CDC and CMS for revising policies to ensure timely and appropriate patient access to new and potentially lifesaving vaccines.

AGHE's Program Resource Development Workgroup: What Can We Do for You?

*By Mary Ann Erickson, PhD, FAGHE, Professor, Health Sciences & Public Health, Ithaca College, and Chair,
AGHE Program Resource Development Workgroup*

AGHE's Program Resource Development Workgroup (PRDW) is charged with supporting mechanisms that assist faculty at academic institutions to develop, evaluate, and strengthen age-inclusive gerontology and geriatrics educational programs. The workgroup has met several times this year and sponsored a webinar in May. We will also have a symposium session titled "How Gerontology Programs Are Meeting Challenges in Higher Education" at the GSA Annual Scientific Meeting in Tampa on Thursday, November 9, at noon.

Our discussions this year have focused on two areas:

Program Evaluation and Review

One of PRDW's key roles is to support AGHE's [Program of Merit](#) (POM). The POM is a voluntary evaluation process to recognize quality gerontology and health professions programs with an AGHE "stamp of approval." For programs awarded the POM designation, the benefits include verifying program quality to administrators, lobbying for additional resources to maintain a quality program, marketing the program, and recruiting prospective students. For those health professions programs integrating gerontology/geriatrics competencies into their curriculum, students are better prepared for working with older adults and their informal care partners. The Program of Merit highlights quality in gerontology and health professions programs. The latest published update of AGHE's [Gerontology and Geriatrics Curricular Standards and Guidelines in Higher Education, 7th edition](#) is the key document when conducting a POM review.

At our [May webinar](#), the co-editors of the 7th edition of the AGHE Standards and Guidelines, Marilyn R. Gugliucci and Tamar Shovali, discussed the importance of the shift to competency-based education for gerontology and provided an overview of the revised chapters for all health professions programs with dedicated chapters to the Doctor of Pharmacy and Osteopathic Medicine degrees. The AGHE Standards and Guidelines provide the foundation for curriculum development and program enhancement, including appendices that offer competencies in gerontology and health professions, as well as competency mapping tools.

Many AGHE members will also be aware of the opportunity

for accreditation through the [Accreditation for Gerontology Education](#) Council (AGEC). Both accreditation through AGECEC and recognition as a POM are ways to guide program review and to achieve recognition. AGHE members should be aware of some key differences between accreditation and POM recognition:

- Accreditation is only for gerontology degree programs (associate, baccalaureate, or master's degrees); POM can also recognize gerontology minors and certificates and international degree programs with limited translation capability.
- Health professions programs are encouraged to apply to be recognized as an AGHE POM that highlights their integration of gerontology/geriatrics competencies, which their accreditation bodies do not.
- After receiving a five-year POM designation, mature gerontology degree programs will not need to be reviewed for POM renewal if they meet AGECEC application requirements.
- POM is an AGHE program; AGECEC is a separate accreditation entity but works closely with GSA and AGHE.
- The AGECEC accreditation process requires a site visit; the POM application does not require a site visit.

Micro-Credentials

Another area of interest for PRDW is micro-credentials. Micro-credentials in the context of colleges and universities are usually collections of several courses packaged to appeal to non-matriculated students, usually for workforce enhancement. At PRDW meetings, we have heard about micro-credentials in gerontology being offered at the University of Alaska Anchorage and Northern Kentucky University. An essential resource for AGHE members wanting to learn more about micro-credentials is the Guest et al. article in *Gerontology and Geriatrics Education*, "[An Environmental Scan of Aging-Related Micro-credentials: Implications for Gerontology and Gerontologists.](#)"

Next Steps

PRDW wants to know what programming and resources best support gerontology and geriatrics programs. If you have a question or idea that could inform our efforts, please feel free to contact the PRDW chair, Mary Ann Erickson, at merickson@ithaca.edu.

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Get to Know Your Junior Leaders: Academy for Gerontology in Higher Education

By Janelle Fassi, MS, and YanJu Su, MS

Hello from Janelle Fassi and Yan-Jhu Su, your Academy for Gerontology in Higher Education (AGHE) junior leaders!

Janelle, the first-year junior leader, is a third-year gerontology doctoral student at UMass Boston. She is from Goffstown, New Hampshire, and received a Bachelor of Arts degree in psychology and communication from Saint Anselm College. At UMass Boston, her second-year paper titled “Creative Leisure Activities and Cognitive Functioning among Older Adults: Does Education Moderate the Benefits of Creative Activity Engagement” led to her Master of Science degree. She is also a research assistant with UMass Boston’s Long-Term Services and Supports Center. Her research interests include intergenerational activities, grandparent caregiving, and older voter voting patterns. Aside from her role as junior leader, Janelle sits on the AGHE Award and AGHE Executive Committees and was a 2022 recipient of the James McKenney Student Travel Award.



Fassi



Su

Yan-Jhu, the second-year junior leader, is currently a doctorate candidate at UMass Boston and hails from Taipei, Taiwan. His educational journey includes obtaining a master’s degree in violin performance from the University of Miami. Later, he transitioned to Lesley University, where he focused on clinical mental health counseling, specifically in the field of music therapy. His accomplishments there include earning a master of arts degree after completing a thesis titled “Utilizing Arts-based Interventions to Ease Symptoms in Chinese Patients with Parkinson’s Disease.” Alongside his academic pursuits, he gained practical experience as a music therapist during his second master’s degree at Hebrew SeniorLife. During his time at UMass Boston, he authored a second-year paper, or master’s thesis, titled “The Association between Physical Health and Retirement Planning: Findings from the Health and Retirement Study,” leading to the award of a master of science degree. Yan-Jhu’s current research pursuits center around the aging population’s demographics, health behaviors, health-related aspects among the older adults, health inequalities, cognitive functioning, Alzheimer’s disease and associated dementias, as well as the mental well-being of older adults.

AGHE’s primary goal is to provide assistance to both emerging and experienced academics and educators. In our role as junior leaders, we strive to facilitate connections between the ESPO community and the various opportunities available within AGHE. Within this capacity, we were also actively engaged in the communication workgroup and the Academic Program Development Workgroup (APDW). As part of our efforts this year, we are organizing a workshop as part of the teaching strategies workshop series for APDW. This specific workshop, titled “[Developing Effective Intergenerational Teaching Strategies](#),” is scheduled for October 6.

Additionally, we are planning a special webinar featuring past recipients of the James McKenney Student Travel Award, who will share their insights and experiences gained from attending past GSA annual scientific meetings.

AGHE offers [a range of resources](#) tailored to students and emerging scholars. These include awards like the Student Paper Award, the Student Leadership Award, and the James McKenney Student Travel Award. Furthermore, AGHE supplies valuable teaching materials, including over 75 educational resources in gerontology, up-to-date standards and guidelines in the field, and teaching briefs.

At the 2023 GSA Annual Scientific Meeting in Tampa, Janelle and Yan-Jhu will be co-chairing the AGHE symposium, “Utilizing Technology in the Advancement of Older Adult Education.” We are looking forward to seeing AGHE friends in Tampa soon!

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new resources

National Academies Report Looks at Innovations in Social, Ethical Contexts

The National Academy of Medicine, in collaboration with the National Academies of Sciences, Engineering, and Medicine, established the Committee on Creating a Framework for Emerging Science, Technology, and Innovation in Health and Medicine to provide leadership and engage broad communities in developing a framework for aligning the development and use of transformative technologies with ethical and equitable principles.

The committee's resulting report, "[Toward Equitable Innovation in Health and Medicine: A Framework](#)," describes a governance framework for decisions throughout the innovation life cycle to advance equitable innovation and support an ecosystem that is more responsive to the needs of a broader range of individuals and is better able to recognize and address inequities as they arise.

GSA Releases Three Podcasts in Momentum Discussions Series

GSA's Momentum Discussions are intended to stimulate dialogue on trends with great momentum to advance gerontology. The Society recently aired three new podcasts in this series. [Listen at your convenience](#):

- [Agitation in Alzheimer's Disease: Reflections of a Care Partner](#): In episode, we provide insights into agitation in Alzheimer's disease (AAD) from the perspective of Laura Medders, LCSW, a professional caregiver, and Maureen Morrison, a family member whose loved one lives with AAD. They share how the condition impacts the person with Alzheimer's disease and those around them and offer strategies to prevent and address troubling behavioral and psychological symptoms of dementia associated with AAD.

- [Cognitive Aging and Optimizing Cognitive Health](#): In this episode, Allison Brashear, MD, MBA, a member of the McKnight Brain Research Foundation's Board of Trustees and the University at Buffalo's vice president for health sciences and dean of the Jacobs School; and Angelika Schlanger, PhD, executive director of the foundation, offer insights into brain health, cognitive health, and cognitive aging. They discuss how normal cognitive aging differs from changes in cognitive function due to dementia. Finally, they offer insights into how individuals can take steps to promote their brain health at any age.
- [Why an Early Diagnosis of Dementia Matters](#): In this episode, Bonnie Burman, ScD, president of the Ohio Council for Cognitive Health, discusses barriers to kickstarting brain health conversations and early diagnosis of dementia, offers strategies to overcome them, and highlights how care providers and other communities of interest can use the GSA KAER Toolkit for Brain Health to improve early detection of dementia.

National Poll on Healthy Aging Data Available for Download

The [University of Michigan National Poll on Healthy Aging](#) (NPHA) recently published its [seventh wave of data for free public use](#) through the [National Archive of Computerized Data on Aging \(NACDA\)'s Open Aging Repository](#) to help advance research on aging and health. The NPHA is a nationally representative survey of approximately 2,000 U.S. adults age 50 to 80, sponsored by AARP and Michigan Medicine and directed by the [University of Michigan Institute for Healthcare Policy & Innovation](#). Topics included in the newly released data from the June 2020 poll (Wave 7) include: advance care planning, loneliness, hearing, emergency department visits, the built environment, and telehealth. Information on all available waves of NPHA data [can also be found online](#).

Continued from page 1 - Duke Han Chosen as GSA's Next Psychological Sciences Editor

The journal, with an all-time high impact factor of 6.2, is currently ranked fifth in the gerontology category of the Web of Science Social Science Citation Index.

"It is with great pleasure that we welcome Dr. Han, an internationally renowned professor who has led a highly productive career and mentored many scholars in the field of gerontology," said Elham Mahmoudi, PhD, the chair of GSA's Program, Publications, and Products Committee. "He has dedicated his career to improving the quality of life, well-being, and independence of older adults. His work also has frequently been featured in highly influential media outlets."

At the University of Southern California, Han is the director of the Neuropsychology Division in Family Medicine and a tenured professor of family medicine, neurology, psychology, and gerontology at the Keck School of Medicine. His work focuses on factors that affect cognition and decision making in aging. He also has special interests in leveraging novel empirical

approaches to better understand these factors, and in the advocacy of justice, equity, diversity, and inclusion considerations in aging and neuroscience research. He is the primary investigator or co-investigator on multiple research grants extramurally funded by the National Institutes of Health and private foundations, and he was the recipient of the prestigious Paul B. Beeson fellowship, which is considered the premiere career development award of the National Institute on Aging.

Han is a diplomate of the American Board of Professional Psychology in Clinical Neuropsychology, and a fellow of the American Psychological Association and the National Academy of Neuropsychology. He also is a founding governance committee member of the Global Council on Brain Health, a member of the Scientific Advisory Board for the Alzheimer's Disease Neuroimaging Initiative, and the American Psychological Association Presidential Task Force on Neuropsychological Test Norming in Diverse Populations.

journal news

Innovation in Aging Welcomes Niznik as New Associate Editor

Innovation in Aging has announced that Joshua D. Niznik, PharmD, PhD, has joined the editorial team as associate editor, pharmaceutical outcomes and policy. Niznik is an assistant professor of medicine, Division of Geriatric Medicine & Eshelman School of Pharmacy, Division of Pharmaceutical Outcomes and Policy at the University of North Carolina Chapel Hill. He is a geriatric health services researcher with clinical training in pharmaceutical sciences. His program of research focuses on evaluating the impact of deprescribing or discontinuing medications that may no longer have value in medically complex older adults, including nursing home residents and individuals living with dementia.



Niznik

Series A Extends Deadline for Special Issue on Complex Systems Dynamics

The Biological Sciences and Medical Sciences sections of *The Journals of Gerontology, Series A: Biological Sciences and Medical Sciences* have extended the submission deadline for a joint special issue on “[Complex Systems Dynamics and the Aging Process](#).” Manuscripts are now due November 1. The editors state:

“There are numerous opportunities to use the extensive complex systems toolboxes that have been developed in other fields, complemented by new methods in bioinformatics and systems biology, to measure, monitor, and ultimately improve the process of aging. We are also interested in the application of complexity science to clinical geriatrics, whether it be in heart rate variability or the emergence of frailty. Together, there is now the possibility to start to regard aging processes at all levels — from molecular to

organismal to societal — as products of complex systems dynamics. In this context, we invite articles for this collection that shed light on how aging relates to these dynamics.”

Topics of interest include, but are not limited to fundamental research in aging, including animal, cell, tissue, and computational studies; and translational aging research, including (patho) physiologic, epidemiological, clinical, and computational studies.

The Gerontologist Issues a Call for Papers on Bridging Aging and Disability Research

The Gerontologist is soliciting papers for a special issue on “[Bridging Aging and Disability Research](#),” which will focus on five areas: health and well-being; inclusion, participation, and community; long-term supports and services; income security; and the science of bridging.

The papers envisioned will cover a range of articles: intervention studies, reviews, measurement, original qualitative and quantitative research, humanities and arts, social sciences, theoretical/conceptual models of aging and disability, and forum articles. The editors encourage articles that explore the heterogeneity of the disability experience over time; consider the disability diversification of the aging population; identify commonalities and differences across younger and older populations of persons with disability; consider economic, social, psychological factors and outcomes across the life course for persons growing older with disability, including intersectionality of group identities; analyze policies/programs related to health and social care, rehabilitation, long-term supports and services, caregiving, employment, or other policy areas; explore theoretical and conceptual perspectives; and/or discuss the science of bridging. Authors should articulate the intersections between aging and disability in the literature and research.

A 250-word abstract describing the paper’s intent is due by December 1 for review. Full manuscripts of invited submission will be due May 1, 2024.

Continued from page 1 - GSA Introduces New Logo and Digital Presence

The logo is also incorporated into two digital platforms: our newly redesigned GSA website at geron.org, which has been streamlined to be content-rich, visually appealing, and easily accessible; and the launch of our new learning management system called [GSA Enrich](#), which provides users with a dynamic collection of webinars, podcasts, publications, and training resources.

Collectively, these new assets reflect GSA’s commitment to cultivating excellence in interdisciplinary aging research and education to advance innovations in practice and policy.

Thank you to all members who support the GSA vision of *Meaningful Lives As We Age*.

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Nominations are accepted in the spring of every year. Scan this code for more information.

CONGRATULATIONS TO THE 2022 RECIPIENT:

**NANCY MORROW-HOWELL,
MSW, PHD, FGSA,
WASHINGTON UNIVERSITY
IN ST. LOUIS**

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Maxwell A. Pollack Award for Contributions to Healthy Aging

The Award recognizes an individual whose research, scholarship or practice has generated new or improved policies or practices related to healthy aging.



Make sure to attend the Pollack Award Lecture at GSA 2023. www.gsa2023.org

funding opportunities

Grant Awards to Focus on Training for Clinical Pain Research

The Chronic Pain and Fatigue Research Center at the University of Michigan-Ann Arbor is requesting applications for the [HEAL National K12 Clinical Pain Career Development Award](#), which is a mentored career development program designed to provide protected time for clinicians and scientists to focus on training and conducting clinical pain research. Awards provide a minimum of 75 percent salary support (up to \$100,000/year) plus fringe benefits, and \$50,000/year in research support costs, for up to three years.

This award is intended for scholars who may not be ready for a traditional K-award or independent research (R) award, come from institutional environments that cannot adequately support the scholar's career and/or research objectives, and/or who are unable to form a mentoring team that would make them competitive for a training or independent research award in clinical pain.

Successful applicants will have at least one home-institution mentor who will serve as their primary mentor. The HEAL K-12 program will then work with the scholar to match them with a senior pain research mentor of national stature as well as a mentor

with lived pain experience. Training is split between the scholar's home-institution and didactic resources available remotely or in-person at the University of Michigan.

Letters of intent are due October 20.

ARPA-H Issues Open BAA, Pursuing High-Impact Research Proposals

The U.S. Advanced Research Projects Agency for Health (ARPA-H) has opened its first agency-wide [open broad agency announcement](#) (BAA), seeking funding proposals for research aiming to improve health outcomes across patient populations, communities, diseases, and health conditions. The announcement calls for proposals to outline breakthrough research and technological advancements.

Proposals should investigate unconventional approaches, and challenge accepted assumptions to enable leaps forward in science, technology, systems, or related capabilities. ARPA-H also encourages concepts to advance the objectives of President Joe Biden's Cancer Moonshot, as well as more disease-agnostic approaches.

The proposal deadline is March 14, 2024.



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