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Board of Directors Meets
The GSA Board of Directors met December 14, led by Chair Peter Lichtenberg, PhD, ABPP, FGSA. President James Nelson, PhD, FGSA, provided an update on the GSA 2023 Annual Scientific Meeting, recent travel and speaking invitations from several geriatric groups within Asia, support for incoming/emerging scholars, and DEIA activities. CEO James Appleby, BSPharm, MPH, provided an update on the Annual Scientific Meeting, Ageism First Aid program, cultivating a culture of giving within GSA, and the 2024 CEO Action Plan, which the board approved. The Finance Committee report from Treasurer Carmen Sceppa, MD, PhD, FGSA, presented a FY 2024 break-even annual budget for operations of $10.347 million, which the board approved. Randall Thacker, LLC orientated the board on the GSA strategic planning process for 2024. Vice President of Strategic Alliances and Integrated Communication Karen Tracy also presented an update on 2023 activities and her division’s outlook for 2024.

New GSA Report Explores Social Determinants of Health, Workplace Well-Being

The social determinants of health — and how they influence the health, wealth, and social trajectories of people in the times and places in which they live and work — are the focus of a new report published by GSA with support from the Bank of America. “An Introduction to Social Determinants of Health Across the Life Course and Workplace Well-Being” discusses how clean air and water, safety, connections, and health care are important across the life course.

The report also indicates how other determinants exert greater effects during sensitive periods. For instance, the home environment and early childhood education have an outsized effect on the development of the young person. A growing body of evidence shows that high-quality, full-day educational programs at three or four years of age can develop cognitive and socioemotional skills needed to be ready for school and is particularly beneficial for children from disadvantaged backgrounds. These programs also have societal benefits and positive long-term economic returns, but they must be followed by further quality education and attention to home and community factors. The community and socioeconomic context multiply or minimize opportunities during sensitive periods. For instance, the home environment and early childhood education have an outsized effect on the development of the young person. A growing body of evidence shows that high-quality, full-day educational programs at three or four years of age can develop cognitive and socioemotional skills needed to be ready for school and is particularly beneficial for children from disadvantaged backgrounds. These programs also have societal benefits and positive long-term economic returns, but they must be followed by further quality education and attention to home and community factors. The community and socioeconomic context multiply or minimize opportunities during sensitive periods.

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Members Ask Senate to Support Higher Assisted Living Standards

Speaking at a January 25 hearing of the U.S. Senate Special Committee on Aging, GSA members Jennifer Craft Morgan, PhD, FGSA, and Richard J. Mollot, JD, called on lawmakers to enact policies that enable greater state and national oversight of assisted living facilities, and that bolster the workforce and engagement of residents and care partners.

Senators convened the hearing, titled “Assisted Living Facilities: Understanding Long-Term Care Options for Older Adults,” to examine challenges faced by assisted living facility residents. Committee Chair Bob Casey recently sent letters to the CEOs of three of the largest corporate owners of American assisted living facilities, expressing “significant concerns about workforce shortages and expensive and inadequate care in assisted living facilities raised by recent reporting in The Washington Post and The New York Times,” and requesting the companies provide further information.

As an active member of the Leadership Council of Aging Organizations and the Elder Justice Coalition, GSA has been a steadfast supporter of the Long-Term Care Ombudsman Program. This work includes advocating for specific increased funding for the ombudsman program’s work to ensure quality care and protect the rights of residents of assisted living facilities.

Continued on page 7
In Confronting Displays of Ageism, Reframe — Rather Than Rebut!

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

With the first presidential primary elections underway here in the U.S., it looks increasingly likely the two major party candidates will be the oldest on record — a testament to scientific advances in many fields including public health, agriculture, biomedical research, and others resulting in increased human longevity.

And yet we should all be aware that this has resulted in a surge of publicly voiced ageism that will likely grow in intensity in the nine-month run-up period to Election Day. To the nation’s detriment, this is increasingly seen in the news media, particularly op-eds and on-air commentary, where audiences of millions are exposed to ageist messages daily.

Here at GSA, we’ve been actively engaged in responding to these pervasive ageist messages. I invite all GSA members to join us in speaking out against ageism when you see it. I’m happy to share a new guide, developed by the National Center to Reframe Aging (NCRA) at GSA, that can help you respond — whether it be in your community media outlets or one-on-one conversations with friends and family.

The GSA NCRA continues to advance a long-term social change endeavor to improve the public’s understanding of aging and the essential role that older people play in contributing to families, communities, and society. The NCRA team has been closely monitoring ageist stories in the media and has responded to egregious ageist coverage such as a piece depicting politicians using walkers on the October 2023 edition of the New Yorker, and has supported partners, including the Elder Justice Coalition on a recent letter in response to jokes on Saturday Night Live, in their efforts to address harmful stereotypes of aging.

In response to requests for tools to effectively address ageism in election coverage, the NCRA team has recently released the Responding to Ageist Election Coverage in the Media Guide. You’ll find it printed in its entirety on pages 12 and 13 of this issue of Gerontology News. I encourage you to apply the strategies presented to help combat this epidemic of ageism.

Research shows that aging is a dynamic process that can lead to new abilities, knowledge, and wisdom across the life course. It’s disappointing that ageism, discrimination based on age, has become a central feature of the 2024 election. I am pleased that the NCRA is leading the way to change the way society thinks about aging, and this guide is a wonderful example of its responsiveness. This guide can help empower people to use well-framed language to educate the media.

The guide makes specific recommendations for preparing op-eds and letters to the editor. And it makes three main points that are important to all discussions:

• Tell a positive “developmental” story about aging, emphasizing our unique capacities at every stage of life. Then connect the developmental strengths of older people directly to leadership skills.
• Address ageism by appealing to the idea that we want to build a just society, which values the contributions of people at all ages and life stages.
• Ageist discourse is based on many harmful stereotypes about older people. It may be tempting to rebut these labels or ideas, but when we repeat stereotypes, we inadvertently cue and reinforce them. So, where possible, reframe — don’t rebut. Instead, focus on writing affirmatively about the relevant benefits of getting older.

As the nation’s experts on aging, we all have a role to play in responding to ageism, and there’s no better time than the present as the election brings discussions about age and aging into the spotlight.
Members in the News

- On December 8, Karl Pillemer, PhD, FGSA, was quoted in a Forbes article titled “Want To Live Longer? Refine Retirement With ‘Active Green Aging.’”
- Karen Fredrikson-Goldsen, PhD, FGSA, was quoted in The Seattle Times on December 13 in an article titled “Capitol Hill housing for older LGBTQ+ adults provides support, safety.”

Member Spotlight

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

Rozmin Jiwani, PhD, APRN, ACNS-BC

Member Referral Program

This month’s $25 Amazon gift certificate winner: Sara Moorman, PhD, FGSA

The recipient, who became eligible after referring new member Reza Tayari Ashtiani, MA, was randomly selected using randomizer.org. For more details on the Member Referral Program visit: www.geron.org/referral.

Clark-Shirley Takes Top ASA Posts

The American Society on Aging (ASA) has named Leanne Clark-Shirley, PhD, FGSA, as the organization’s president and CEO; she had been serving in these roles in an interim capacity since September 1, 2023. She previously served as ASA’s first chief gerontology officer and has been with the organization since June 2020.

According to an announcement from ASA, “Clark-Shirley will continue her strategic leadership amplifying ASAs national reputation as the preeminent convener in the field of aging. She also will broaden ASAs membership, expand opportunities for members to collectively shape the field, and continue to define leading-edge practices in diversity, equity and inclusion.”

She is a social gerontologist with nearly 20 years of experience working in aging-related nonprofit, consulting, and academic environments. Before joining ASA, she was AARP’s senior evaluation advisor, responsible for strategic planning, building internal evaluation research capacity, and applying impact measurement expertise at the departmental and enterprise levels. Prior to that, she led the aging and disability research practice at IMPAQ International, a think-tank and policy research firm.

GSA Fellows Nominations

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

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

**Nominations open December 15, 2023 and close February 15, 2024.**

Find out more about nomination requirements and procedures at www.Geron.org/Fellows.
The Fiscal Year (FY) 2024 budget and appropriations battles within Congress linger on and have now been partially subsumed by the battles abroad. Here is how we got this far this slowly: a debt limit deal between President Joe Biden and former House Speaker Kevin McCarthy (R-CA) paid our bills, and sent McCarthy packing after a revolt from his own party; new House Speaker Mike Johnson’s (R-LA) idea to split the appropriations bills into two packages kept government going through the holidays and his conservatives at bay; facing another potential government shutdown, another double deal until March 1 and 8 between Senate Majority Leader Chuck Schumer (D-NY) and Johnson with a few minor concessions and more animus brings us up to this month’s column.

The latest bill passed with help from most Democrats on a vote of 314 to 108 in the House and 77 to 18 in the Senate. This leaves Johnson stuck somewhere between his unhappy conservatives who want bigger spending cuts and a government shutdown that will likely be blamed on the Republicans who hold a slim majority in the House. A future question pundits are discussing is whether enough Democrats would support Johnson if there was another revolt from his side of the aisle.

The stars of this whole process to date have been Senate Appropriations Chair Patty Murray (D-WA) and Vice-Chair Susan Collins (R-ME) who worked out 12 compromise bills many months ago. In late January, Murray and House Appropriations Chair Kay Granger (R-TX) concluded a deal that lays out the totals for the dozen spending bills so that the Appropriations Subcommittees of the Senate and House can work over the next four weeks or so to determine specific spending for hundreds of federal programs (e.g., National Institutes of Health/National Institute on Aging) that will total more than $1.7 trillion. There is still no smooth sailing in sight for appropriations. The White House and most members of both parties in Congress are supporting aid for Ukraine, Israel, and Taiwan. Some Republicans have insisted, and many Democrats have agreed, to include funds for U.S. border security in a supplemental appropriations package. So, for many weeks senators have been working out a compromise on border issues that they hoped to share with the full Senate in the next week or so.

Not so fast, says former President Donald Trump and many of his stalwarts in the Senate and House. They argue that the deal will be bad, and it will take the issue away from their party in the fall elections. Some senators who have been working on the deal are now facing negative feedback here and in their home states. Speaker Johnson has been threatened with a vote of no confidence if he brings such a bill to the House floor.

A similar situation took place in 2013 when the Senate passed a bipartisan bill and Speaker John Boehner refused to call it up for a vote. The players may be different but much of the politics remain the same with some members obsessed with keeping the border issue on the public’s mind prior to the election and stopping a victory on the issue for President Biden.

Now those who insisted on border security along with aid to other nations will likely want to remove the issue from the package if it has a chance of passage. We don’t know how this supplemental bill and the other two packages may affect each other. And let’s not forget that the whole budget/appropriations process for FY 2025 is supposed to begin anew this month.

**Recap of 2023 Legislative Activity**

Here’s a look back at some of the legislative and executive branch activities that may have far-reaching impacts on older people and aging and health policy, as well as on the programs, services, and research that GSA members conduct. This is not an exhaustive list by any means, but it does show the range of issues and the different ways advocates can affect policy.

Provisions of the 2022 Inflation Reduction Act (IRA) implemented in 2023:

- **Biden announced** that 4 million older people on Medicare will begin seeing their insulin costs capped at $35 per month as a result of the IRA.
- In addition, provisions from the 2022 IRA regarding no-cost vaccines for Medicare Part D and Medicaid recipients go into effect with input from the Adult Vaccine Access Coalition of which GSA is an active partner. Read the [GSA coalition sign on letter to CMS regarding vaccine coverage provisions of the Inflation Reduction Act](kff.org). According to Pharmacy Times, “Under the IRA, Medicare Part D enrollees will pay $0 out-of-pocket for these vaccines, which should make them more accessible. For traditional Medicaid enrollees, the IRA ensures that vaccine coverage is a mandatory benefit and further reduces barriers to access by eliminating cost-sharing. Ensuring equal coverage for all recommended vaccines across government sponsored health plans will promote public health, reduce disease burden from VPDs [vaccine preventable diseases], and prioritize reducing racial and socioeconomic disparities compared with other sources of health insurance.”
- In August 2023, the Centers for Medicare and Medicaid Services (CMS) announced the 10 drugs covered under Medicare Part D selected for the first cycle of price negotiations: treatments for diabetes (Farxiga, Fiasp/NovoLog, Januvia, Jardiance), blood clots (Eliquis, Xarelto), heart failure (Entresto, Farxiga), psoriasis (Stelara, Enbrel), rheumatoid arthritis (Enbrel), Crohn’s disease (Stelara), and blood cancers (Imbruvica). According to [KFF](kff.org), between June 2022 and May
2023, 8.3 million Medicare Part D enrollees used one or more of these medications. Negotiated prices for these 10 drugs will be available on January 1, 2026.

GSA and other members of the Obesity Care Advocacy Network supported the introduction of H.R. 4818, the Treat and Reduce Obesity Act of 2023, which would expand Medicare coverage of intensive behavioral therapy for obesity and allow Part D coverage of drugs used for the treatment of obesity or for weight loss management.

On April 18, Biden signed a comprehensive Executive Order on Increasing Access to High-Quality Care and Supporting Caregivers. Susan E. Rice, the director of the White House’s Domestic Policy Council, said “The order includes more than 50 directives to nearly every agency to take action on fixing our child care and long-term care system.” An example of the executive order’s impact involves the CMS’s final rule on changes in the Medicare Physician Fee Schedule for Calendar Year 2024 to provide payment when providers (such as physician, nurse practitioner, physician assistant, therapist, etc.) train caregivers to support patients in carrying out a treatment plan.

Senators Tom Carper (D-DE), Bill Cassidy (R-LA), and Representatives Earl Blumenauer (D-OR) and Brad Wenstrup (R-OH) introduced the Program of All-Inclusive Care for the Elderly (PACE) Part D Choice Act of 2023 on May 18, 2023. If passed, the bill would allow Medicare-only PACE enrollees to choose between the PACE Part D plan, currently available, or a qualified standalone Part D plan that may be more affordable.

On July 31, 2023, CMS launched the new Guiding an Improved Dementia Experience (GUIDE) Model. “The GUIDE Model will test whether a comprehensive package of care coordination and management, caregiver support and education, and respite services can improve quality of life for people with dementia and their caregivers while delaying avoidable long-term nursing home care and enabling more people to remain at home through end of life.” An alternative payment model, GUIDE will provide per beneficiary-per month coverage to health systems, medical groups, and community-based organizations participating in the GUIDE program.

The Administration for Community Living released its first set of proposed regulations for adult protective services (APS) programs. APS programs investigate reports of maltreatment, including abuse, neglect, self-neglect, or exploitation of older adults and adults with disabilities.

The Alleviating Barriers for Caregivers (ABC) Act, S. 3109, was introduced by Senators Ed Markey (D-MA) and Shelley Moore Capito (R-WV) October 2023. The bill would require CMS and the Social Security Administration to review their eligibility processes, procedures, forms, and communications for Medicare, Medicaid, Children’s Health Insurance Program, and the Social Security programs to reduce administrative challenges for family caregivers.

CMS released a final rule to streamline enrollment in the Medicare Savings Programs. This is expected to decrease the cost of coverage for 860,000 people, save older adults and people with disabilities around 19 million hours in paperwork annually, and alleviate state administrative burden.

Senator Bob Casey (D-PA), chair of the Senate Special Committee on Aging, led a group of 17 Democratic colleagues in introducing the Home and Community-Based Services (HCBS) Relief Act of 2023. The proposed legislation would support state programs funding home and community-based long-term care services.

The White House’s Domestic Policy Council and the Office of Science and Technology Policy released the U.S. Playbook to Address Social Determinants of Health in November 2023. The publication emphasizes that “improving health and well-being across America requires addressing the social and environmental circumstances that impact health outcomes.” The playbook outlines federal actions that are underway and those that need to be implemented to achieve “a future where health and social circumstances can be addressed holistically and equitably.”

On December 5, 2023, the House passed the Elizabeth Dole Home-and Community-Based Services for Veterans and Caregivers Act (H.R. 542) with a vote of 414 to 5. The bill would expand community-based services for aging veterans as well as improve VA support for veterans and caregivers of all ages. It’s now awaiting action by the Senate.

In closing, I know that GSA members have been involved in many if not all of the issues discussed above, and to you I say thank you and keep up the great work.

Recent GSA Policy Actions
GSA and several aging, disability, healthcare access, and civil rights organizations signed a letter to the Centers for Medicare & Medicaid Services Administration, asking it to amend Medicare’s custody definition to align with the Medicaid and Marketplace definitions. This change would ensure that Medicare eligible older adults and people with disabilities who are on parole, required to reside in halfway houses, or were previously incarcerated can access health insurance coverage and care.

GSA signed onto several Fiscal Year (FY) 2024 appropriations letters in support of funding for aging research, education, and practice.

• In a letter to House and Senate appropriations leaders, the Friends of Health Resources and Services Administration (HRSA) requests that the FY 2024 Labor, Health and Human Services Education appropriations bill receive the highest possible level of funding for HRSA. It argues that strong funding for HRSA is critical in supporting HRSA’s activities and programs and essential to protecting the health of our communities.

• The Adult Vaccine Access Coalition (AVAC) along with 139 members of the CDC Coalition supported an FY 2024 appropriations letter to House and Senate Committee leaders. The letter urges for Centers for Disease Control and Prevention (CDC) funding to be prioritized and that cuts or damaging policy riders related to the CDC’s programs in the finalized FY 2024 Labor, Health and Human Services, Education and Related Agencies appropriations bill, be rejected.
ESPO’s Vice Chair-Elect Shares Vision for Upcoming Year

By Sohyun Kim, PhD, RN

I can bring a unique perspective to ESPO; my experiences working with diverse populations in different settings have given me a deep understanding of the importance of diversity, equity, and inclusion in creating a thriving community. Volunteering in several roles within GSA allowed me to develop skills in leadership, communication, and collaboration that will be valuable in a leadership role.

My goal for this year as a vice chair-elect is to help GSA continue to provide meaningful opportunities for career development and mentoring to the ESPO members. I also want to learn from and support current ESPO leadership to facilitate current and new programs for ESPO members.

Specifically, I would like to focus on mentoring programs that help underrepresented group members gain access to leadership positions and advocate for older adults with diverse backgrounds. Also, I would like to focus on mentoring programs to support ESPO members in career development to serve older adults in various workplaces.

As the population continues to age, the role of GSA in advocating for policies and programs that support older adults has become crucial. I foresee GSA continuing to expand its outreach efforts to underrepresented communities and partnering with other organizations to advance its mission. I believe that GSA will play a key role even more in shaping public policy by engaging with policymakers and supporting the needs of older adults.

Sohyun Kim, PhD, is an assistant professor at the University of Texas at Arlington College of Nursing and Health Innovation. Her research interest focuses on leveraging technology-based interventions including video chat, wearable devices, virtual reality, and home monitoring to enhance the quality of life for family and formal caregivers and persons living with dementia. Currently, Kim conducts two dyadic communication intervention studies: a video family visit intervention for residents living with dementia and their family caregivers at nursing homes, and a virtual reality simulation training for nursing students using AI generated persons living with dementia. Kim has been a GSA member since 2017, during her PhD program at the University of Iowa College of Nursing. She has volunteered for several roles within GSA, including conference abstract peer reviewer (2020, 2021, 2023), ESPO awards reviewer (2021), and ESPO Dissertation Writing Group task force member (2021), co-lead (2022), and lead (2023-present). In 2021, Kim was awarded the GSA Mentoring and Career Development Technical Assistance Workshop Award (R13).

Continued from page 1 - New GSA Report Explores Social Determinants of Health, Workplace Well-Being

adolescence and young adulthood when important career and family decisions are made. Later in life, employment enables people to continue working and accumulating wealth, and this affects the length and quality of their years of remaining life.

"Social determinants of health can present opportunities and challenges while interacting with each other to multiply advantages and disadvantages over the life course," said Brandy Wallace, PhD, FGSA, chair of the Advisory Board for the report and Associate Professor of Sociology at the University of Maryland, Baltimore County. “Education and work are excellent examples of this — education for children and young people and employment later in life are very important contributors to a person’s life potential. As we highlight in the report, access to quality education has a direct influence on workforce participation, which in turn impacts financial resources, health, and well-being.”

This project is one of many examples of how GSA collaborates with key partners to inform GSA members and others on topics where there are knowledge gaps due to environmental changes, policy changes, new research findings, guideline changes, practice challenges, or new products entering the market. The fifth in a series of longevity reports developed with Bank of America, this publication informs gerontologists and employers who seek an understanding of the role social determinants of health play across the life course of employees and why it is essential for organizations seeking to recruit and retain a diverse and highly effective workforce. Through sidebars illustrating innovations by employers, the report demonstrates the important role companies play in optimizing the social determinants of health for employees and families, their customers, and the communities they serve.

“As companies plan for the next generation of benefits, this report stimulates thinking about the unique factors influencing health at each phase of life,” said Kai Walker, member of the Advisory Board and Head of Retirement Research and Inclusion Transformation at Bank of America. “Employers can play a critical role in enhancing the well-being of their employees by considering the effects of economic stability, education, health care access and quality, home environments and the community.”
HHS Releases National Alzheimer’s Plan Update

On December 13, U.S. Department of Health and Human Services (HHS) Secretary Xavier Becerra released HHS’s National Plan to Address Alzheimer’s Disease: 2023 Update. The National Plan is a roadmap of strategies and actions of how HHS and its partners can accelerate research, expand treatments, improve care, support people living with dementia and their caregivers, and encourage action to reduce risk factors. It highlights the progress made in 2023, which was an historic year for the treatment of Alzheimer’s disease and related dementias (AD/ADRD) and care for people with this condition.

The National Alzheimer’s Project Act, which was signed into law in 2011, established the Advisory Council on Alzheimer’s Research, Care, and Services and charged the HHS secretary with creating and annually updating a National Plan to Address Alzheimer’s Disease. The plan is developed with input from agencies across HHS and other federal departments as well as recommendations from the Advisory Council, whose members include healthcare providers, researchers, caregivers, individuals living with dementia, state representatives, as recommendations from the Advisory Council, whose members include healthcare providers, researchers, caregivers, individuals living with dementia, state representatives, and advocates.

AHRQ Aging Roundtable Report Influenced by GSA Members

The Agency for Healthcare Research and Quality (AHRQ) recently released the “Optimizing Health and Function as We Age Roundtable Report,” which explores opportunities such as developing a person-centered care system, and integrating the voices of older adults, caregivers, and communities in designing effective models of care for improving older adults’ health and well-being.

The roundtable brought multidisciplinary experts together, including many GSA members, to discuss how AHRQ can impact research, dissemination and implementation of evidence to improve the organization and delivery of healthcare with the goal of optimizing health, functional status and well-being of the U.S. population as it ages.

New Brief Released in Support of Family Caregivers’ Mental Health

The latest installment in the National Alliance for Caregiving’s Spotlight Series, “Caring for the Carers: A Spotlight Brief for Supporting the Mental Health of Family Caregivers,” explores how caregiving can impact mental health. The alliance conducted a literature review, an expert convening, and collected testimonials from caregivers; the brief outlines recommendations to elevate the mental health of family caregivers, increase dialogue, and advance policies that can address the negative mental health impacts family caregivers too often face.

ADRD Care Should Prioritize Equal Access for All, NIA IMPACT Report Says

A new report, “Voices of the Lived Experience Panel: Health Equity in Dementia Care and Research,” summarizes the overarching themes that emerged during four meetings of the National Institute on Aging (NIA) IMPACT Collaboratory’s Lived Experience Panel, the Health Equity Team, and the Engaging Partners Team. The goal of these discussions was to learn about panel members’ lived experiences and insights related to health equity in dementia care and research practices.

The report documents a conversational process among panelists. Two major concepts emerged. The first is that people living with Alzheimer’s disease and Alzheimer’s disease-related dementias (AD/ADRD) and their families have different experiences from one another. The second is that there is a need for a broad and inclusive plan to understand and address weaknesses within the systems of care in the U.S., which are often fragmented and lack accountability for health equity.

Continued from page 1 - Members Ask Senate to Support Higher Assisted Living Standards

“Assisted living is a large and growing long-term care residential option for individuals who need or want additional supports for activities of daily living,” said Morgan, who serves as a professor and director of the Gerontology Institute at Georgia State University. “There are approximately 30,600 assisted living communities in the U.S. with almost 1.2 million licensed beds and 818,800 residents. This industry employs a total of 478,500 workers, 66 percent of which are direct care workers.”

In her testimony, Morgan recommended that the Senate take steps to support the standardization of monitoring and resources to increase state-based oversight and transparency; improve and standardize initial and continuing education training for direct care workers in assisted living; professionalize the direct care workforce; incentivize and reward good employers who deliver high quality care; increase access to assisted living; and improve care coordination and resources for people living with dementia and their care partners.

Testimony from Mollot, who serves as the executive director of the Long Term Care Community Coalition, included recommendations to establish and implement national standards to promote quality, safety, and integrity in assisted living; establish a national assisted living database; and promote resident and family engagement.

“Improving transparency, quality, and accountability in assisted living is not only a matter of public interest but a moral imperative,” Mollot said. “Now more than ever, federal action is needed to ensure that older Americans receive the care and support they deserve while fostering a system that promotes transparency and accountability within the industry.”
GSA is deeply indebted to the following agencies, corporations, foundations, and individuals for their contributions to the Society and its activities during 2023.
Learn how your support can help GSA advance research, education, and practice in the field of aging at www.geron.org/donate.
Call for 2024 Award Submissions

CAREER AWARDS

The Gerontological Society of America recognizes outstanding individuals through a variety of awards. Nominations for these awards open February 1 and must be submitted by March 31. For a full description of nomination requirements, nomination resources, and the list of past awardees, visit www.geron.org/membership/awards or e-mail awards@geron.org.

SOCIETY-WIDE

Donald P. Kent Award
This award is given annually to a GSA member who best exemplifies the highest standards for professional leadership in gerontology through teaching, service, and interpretation of gerontology to the larger society.

Robert W. Kleemeier Award
This award is given annually to a GSA member in recognition for outstanding research in the field of gerontology.

James Jackson Outstanding Mentorship Award
This award recognizes outstanding commitment and dedication to mentoring minority researchers in the field of aging.

Margret M. and Paul B. Baltes Foundation Award
This award acknowledges outstanding early career contributions in behavioral and social gerontology.

M. Powell Lawton Award
This award honors contributions from applied gerontological research that have benefited older people and their care. Sponsored by the Abramson Senior Care’s Polisher Research Institute

Maxwell A. Pollock Award for Contributions to Healthy Aging
This award recognizes an individual whose research, scholarship or practice has generated new or improved policies or practices related to healthy aging. Sponsored by the New York Community Trust through a generous gift from Maxwell A. Pollock Fund.

Doris Schwartz Gerontological Nursing Research Award
This award is given to a member GSA in recognition of outstanding and sustained contribution to geriatric nursing research.

BEHAVIORAL AND SOCIAL SCIENCES (BSS) SECTION

Distinguished Career Contribution to Gerontology Award
This award recognizes career contributions that have articulated a novel theoretical or methodological perspective or synthesis that addresses a significant problem in the literature.

Distinguished Mentorship in Gerontology Award
This award is given to an individual who has fostered excellence in, and had a major impact on, the field by virtue of their mentoring, and whose inspiration is sought by students and colleagues.

Richard Kalish Innovative Publication Award
This award recognizes original and innovative publications on aging and life course research in the behavioral and social sciences in two categories: (1) Book Category and (2) Article Category.

BIOLOGICAL SCIENCES (BS) SECTION

Nathan Shock New Investigator Award
This award recognizes innovative and influential publications by an early career professional (Assistant Professor or Associate Professor level). It acknowledges outstanding contributions to new knowledge about aging through basic biological research.
HEALTH SCIENCES (HS) SECTION

Joseph T. Freeman Award
This award is given to a prominent clinician in the field of aging, both in research and practice.

Excellence in Rehabilitation of Aging Persons Award
This award is designed to acknowledge outstanding contributions in the field of rehabilitation of aging persons.

*New Award* Mid-Career Innovation Award
This award acknowledges outstanding contributions of an established mid-career GSA member of the Health Science section to an innovative and influential area of the field in research and/or practice.

SOCIAL RESEARCH, POLICY, AND PRACTICE (SRPP) SECTION

Elaine M. Brody SRPP Thought Leader Award
This award acknowledges outstanding career contributions in social research, policy, and practice.

Barbara J. Berkman SRPP Award for Outstanding Interdisciplinary Research, Practice, or Policy in Aging and Health Care
This award recognizes individuals whose professional work mirrors the varied accomplishments and attributes of Dr. Barbara Berkman’s career. It honors individuals who have contributed to the well-being of older persons through many years of significant and very substantive contributions to research, practice and policy in aging and health care services.

Carroll L. Estes SRPP Rising Star Award
This award acknowledges outstanding early career contributions in social research, policy, and practice.

ACADEMY FOR GERONTOLOGY IN HIGHER EDUCATION (AGHE)

Clark Tibbitts Award
This award is given to an individual or organization that has made an outstanding contribution to the advancement of gerontology as a field of study in institutions of higher education.

Hiram J. Friedsam Mentorship Award
This award recognizes individuals who have contributed to gerontological and/or geriatrics education through excellence in mentorship to students, faculty, and administrators.

Distinguished Faculty Award
This award recognizes persons whose teaching stands out as exemplary, innovative, of impact, or any combination thereof.

Rising Star Early Career Faculty Award
This award recognizes new faculty whose teaching and/or leadership stands out as impactful and innovative.

David A. Peterson Award
This award honors excellence in scholarship in academic gerontology and/or geriatrics for an article in a volume of Gerontology & Geriatrics Education.

Student Leadership Award
This award recognizes students whose leadership has advanced the goals and mission of AGHE as well as the respective goals of their AGHE-affiliated institutions.

Book Award for Best Children’s Literature on Aging
This award recognizes positive portrayals of older adults in children’s literature.
As the 2024 election cycle ramps up, there has been an increase of ageist media coverage focused on our elected officials and both Democratic and Republican candidates. Many of us have been unsure how to respond most productively. The National Center to Reframe Aging, the trusted source for proven communication strategies and tools to effectively frame aging issues, has created this guide to pave the way for us all to answer constructively. We believe it is important for all of us to have the tools to reply to these very public displays of ageism and remind the American public that, like the rest of us, (even) politicians grow in ways that improve their ability to do their work as they get older.

In addition to guidance on addressing ageism during the election season, this resource includes advice on two of the main ways these approaches can be made public — writing a letter to the editor in response to an article or editorial or writing an op-ed piece. Both types of commentary can be circulated on your social media platforms to maximize audience reach.

Crafting Language That Reframes Aging

1. Tell a positive “developmental” story about aging, emphasizing our unique capacities at every stage of life. Then connect the developmental strengths of older people directly to leadership skills.
   - Stay fully strength based. Avoid phrases such as “when we get older, we get better,” which can be heard as diminishing the potential contributions of people of different ages. Lift up the value and contributions of older people without making negative comparisons to other ages.
     – Example: “Each stage of life comes with different knowledge, abilities, capacities and strengths, which are all valuable in our society.”
   - Pivot to a specific developmental strength of older people. It is not enough to say, “experience matters” or use clichés such as “older and wiser.” Talk in detail about the unique capacities of older people and explicitly connect those exceptional qualifications to leadership skills.
     – Example: “As we age, we gain lots of experience in making decisions under stressful circumstances, which is critical to people in government or elected office.”

2. Address ageism by appealing to the idea that we want to build a just society, which values the contributions of people at all ages.
   - Anchor all responses in the value of justice. While there are different tactics that we can use to address specific forms of ageism, all of them boil down to the desire for equity and fairness.
     – Example: In response to the call for testing older officials for mental or cognitive competency, you might say, “Historically, mental competency tests have been misapplied to exclude various groups from full participation. They are fundamentally flawed, don’t measure people’s capacities, and have no place in a democratic society.”

3. Ageist discourse is based on many harmful stereotypes about older people. It may be tempting to rebut those labels or ideas, but when we repeat stereotypes, we cue and reinforce them.
   - Where possible, reframe—don’t rebut. In contentious and even combative communications contexts, make sure you are on your own ground. Write affirmatively about the relevant benefits of getting older.
     – Example: “Aging is a dynamic process that can lead to new abilities and knowledge. It generates experiences that can inform our decision making, expand our networks, and deepen our relationships and judgment. Why not evaluate our political leaders, no matter their age, along these dimensions, which are clearly more relevant to high office?”
   - Make your affirmative case first. If you have to rebut a harmful stereotype, open by presenting your affirmative case.
     – Example: “For most people, every year that passes leaves us with new experiences that can inform our decision making and expand our networks. Unfortunately, negative stereotypes around aging suggest that as we grow older, we’re less able to contribute to society.”
Tips for Writing Effective Letters to the Editor and Op-Eds

Letters to the Editor
A letter to the editor is a very short response to an article or editorial that has recently appeared in a newspaper, magazine or digital publication. Its purpose can be to express either support for or criticism of a particular piece or even respond to a specific point or idea that is part of a larger article.

Some things to keep in mind when composing a letter to the editor:

➤ Be brief. Aim for 150 words or so, though shorter tends to be better.

➤ Start strong. The first sentence or two of your letter should contain the title and date of the article to which you are responding and the specific point that you either support or oppose. For example:

To the Editor:

David Remnick writes “the prospect of a Presidential election as a contest of the ancients is not a heartening one, and the anxieties it provokes cannot be dismissed as ageism” (The Washington Gerontocracy, September 24, 2023). Perhaps, but the issue’s cover depicting various leaders racing with walkers is most certainly ageist—and ableist.

➤ Act immediately. The news cycle stops for no one. Submit your letter to the editor within a couple of days and no more than a week after the original article is published. The sooner you get it submitted, the more relevant it will be, and the better chance that it will be posted or published.

➤ Focus on making your main point. Don’t waste valuable words talking about your own organization or programs (which may be viewed by editors as self-serving). Focus on making your point.

➤ Select one spokesperson. A letter to the editor should not come from an entire organization. Rather, it can be signed by a person (or two), noting her/his/their organizational affiliation.

Op-Eds
An op-ed is a short opinion piece expressing a viewpoint on a timely news topic. (Fun fact: It is called an op-ed not because it has an op-inion, but because in the days before digital newspapers, these pieces ran op-posite the ed-itorial page.) Here are some tips to help you draft your op-ed:

➤ Be timely. Editors need a reason to publish your viewpoint right now so it’s important to connect your article to something that is happening at this moment. For example, negative coverage of a politician using an assistive device, such as a cane, could be an opportunity to write about the intersectionality of ageism and ableism.

➤ Know the word limit. In general, 600 to 750 words is a good length, but check the paper’s online submission guidelines.

➤ Start strong and end strong. Grab your reader’s attention quickly using a personal story or a specific example of ageism. Your final paragraph is critical to summarizing your argument and leaving readers with a clear call to action.

➤ Avoid jargon. Make sure someone with very limited knowledge of the subject/our field can understand what you’re trying to say. Don’t use acronyms or industry terms without providing a definition and/or context.

➤ Make a specific recommendation. Don’t just call out an issue or problem; provide concrete solutions.

➤ (Very briefly) include the other side of the argument. You can counter ageism without dismissing people’s reasonable concerns. Op-eds that include a “to be sure” paragraph towards the end with a point or two from the other side come off as more credible and balanced.

➤ Go one at a time. You cannot send your op-ed to multiple outlets at once. Only after one outlet has passed on it (or you haven’t heard back in five business days) should you try the next one.

➤ Don’t forget about your own channels. Congrats! You’ve gotten an op-ed published—but you are not done yet. Maximize this opportunity by sharing a link to the op-ed across your social channels, in your newsletter and/or to your organizational partners.
As the president of the first student chapter of GSA established in Portugal, my experience has been challenging and immensely rewarding. It all began as a distant possibility, but dedication and perseverance have brought it to fruition. Since its establishment in October of 2022, our chapter has experienced steady growth in terms of membership and the opportunities we provide our members and the academic community at large.

As an international student who moved to Portugal from the U.S., I recognized the importance of creating a connection between the two countries, and being part of the GSA student chapter pilot program has helped me accomplish that. The experience of living abroad has given me a unique perspective on the significance of building bridges and transcending borders. Through the GSA student chapter, we are creating connections within Portugal and forging links with the global community of professionals in the field of aging.

The support and dedication of my team, alongside the guidance of our advisor, have been crucial in the success and takeoff of this chapter. Through creating members-only and other inclusive academic events, we have successfully created a space that encourages collaboration and growth. One particular event that stands out is the collaboration between our chapter and the GSA student chapter from Portland State University. This event served as an example of the possibilities that arise when Portuguese and American students come together. It showcased the potential for international collaborations and opened doors for future opportunities.

I would like to express my heartfelt gratitude to the Academy for Gerontology in Higher Education (AGHE) for awarding me the James McKenney Travel Award. This honor provided me with the opportunity to attend the GSA annual conference last year, an extraordinary experience where I had the privilege to meet professionals in the field, network, and acquire invaluable knowledge. Additionally, I am incredibly grateful to have received the AGHE Student Leadership Award 2023; I want to express my deepest gratitude to those who nominated me, their belief in my abilities and dedication has been a tremendous source of motivation and support.

I am grateful for the opportunity to have met and connected with members of the GSA who have supported me throughout this journey. Since joining GSA, I have felt warmly welcomed into a community of like-minded individuals who share a passion for gerontology. The benefits and rewards of being part of the GSA have been imperative to my development as a doctoral student. One major contribution was meeting my current co-advisor, whom I initially connected with as a mentor at GSA. Her wisdom and support have been vital in my academic journey.

In conclusion, my journey as the president of the GSA student chapter in Portugal has been an amazing opportunity fueled by my team’s collaborative efforts and passion. Together, we are committed to promoting meaningful connections, creating a lasting legacy, and uniting students and professionals worldwide in the pursuit of a brighter future for the lives of older adults.

[Editor’s Note: GSA has worked to develop and enhance a student chapter model over the last two years — supporting the next generation of gerontologists and allowing students to network. The successful pilot program looks forward to continued growth — keep an eye on this space for additional information about how you can start a GSA student chapter at your institution. If you have further questions, contact membership@geron.org.]

—M. Aaron Guest
Policy Fellows Program Opens Call for Applications

The Health and Aging Policy Fellows Program (HAPF) is recruiting for the 2024-2025 fellowship year. Applications are due April 15.

The goal of the program is to provide professionals in health and aging with the experience and skills necessary to help lead this effort, and in so doing, shape a healthy and productive future for older Americans.

The program offers different tracks:

- Residential model: Includes a nine-to-12-month placement in Washington, D.C. or at a state agency (as a legislative assistant in Congress, a professional staff member in an executive agency or in a policy organization).
- Non-residential model: Fellows remain, for the most part, at their home institution, and focus on a project addressing a key policy issue with brief placement(s) throughout the year at relevant policy settings.
- The VA Track: a specific non-residential track for VA staff to represent the Department of Veterans Affairs as a VA/Health and Aging Policy Fellow. VA/Health and Aging Policy Fellows participate through the non-residential track of the fellowship.

The Fellows represent a broad range of disciplines and career stage. Candidates from underrepresented groups are strongly encouraged to apply. Information sessions will be offered through March for the upcoming class. Those interested in becoming a fellow or have questions are strongly recommended to attend.

- Wednesday, March 13, 2024, 12 to 1 p.m. ET
- Wednesday, March 27, 2024, 1 to 2 p.m. ET

AFAR Welcomes Letters of Intent for Funding

The American Federation for Aging Research has several funding opportunities currently available:

- Glenn Foundation Discovery Award (Letters of intent due February 15)
- Glenn Foundation for Medical Research Postdoctoral Fellowships in Aging Research (Letters of intent due February 25)
Share your research at GSA 2024!

Abstract Submissions are open from February 1 – March 14, 2024.

Submit your research as a poster, symposium, or paper presentation for consideration!

GSA2024.org