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Nominate Your Colleagues for GSA/AGHE Fellow Status!
The current nomination period for GSA/AGHE fellow status — the highest class of membership within the Society — is open until February 15. This distinction is an acknowledgment of outstanding and continuing work in the field of gerontology for the entire Society. The nomination must come from a current fellow in the candidate’s own member group. Complete details, requirements, and access to the online nomination form are available on the GSA fellows web page. Email fellows@geron.org to check your membership eligibility.

Join a GSA Interest Group
Did you know GSA has more than 60 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.

New GSA President Shares Inaugural Message
By Judith L. Howe, PhD, MPA, FGSA, FAGHE

As the Gerontological Society of America enters its 79th year, on the brink of its ninth decade since it was founded in 1945, our interdisciplinary community can be proud of our fortitude in shining a light on what aging, and being old means through our research, education, policy making, and advocacy endeavors.

A primary example of our fortitude was with our conviction to hold our Annual Scientific Meeting this past November in Tampa, Florida, to underscore our commitment to challenge discrimination in any form. GSA is resolute in its mission of diversity, inclusion, and equity. Our meeting was fortifying because of the great research that was presented by nearly 4,000 researchers, educators, and clinicians from 43 countries. In addition, new programming including the integration of pre-conference workshops into the meeting at no cost to participants, the inaugural Careers in Aging event for local undergraduate students to attend the meeting Friday and Saturday at no cost, and family friendly activities showcase our drive for continuous innovation.

Fortitude is also illustrated in our long-standing commitment to advocate for policies that promote aging with meaning, to stimulate member engagement throughout the year, and to commit to mentoring our student members who represent the future of gerontology. An area of particular interest to me is the expansion of Careers in Aging events during the month of March and the recent creation of new chapters for undergraduates. This grassroots approach has great potential for students to become interested in gerontology.

We also have the fortitude to address ageism, which is pervasive and often not in the mind of the general population. During my most recent Thanksgiving holiday, something was said about an older adult “being too old” to do something, and a younger person shot back, “That is ageist.” Several people around the table looked confused, and said, “Ageism? Is that a word?” Time was

Treatment of Obesity Must Be Multifaceted, GSA Publication Says

According to “Insights & Implications in Gerontology: The Chronic Disease of Obesity” — a new publication from GSA — overweight and obesity are now recognized as chronic health conditions with specific pathophysiologic causes, with complications if these conditions are not addressed, and with treatments that are safe and effective. And for most older adults, treating overweight and obesity can add years to their lifespan and quality to the years of life when they are healthy.

Obesity rates for adults 65 years of age and older nearly doubled from 22 percent in 1988 to 42 percent in 2020. With the new publication, GSA aims to enhance the understanding among healthcare professionals, policy makers, and consumers of obesity as a disease and the need to intently treat individuals with obesity using guideline-based and standard-informed multidisciplinary and multifaceted plans of care.

It calls attention to the steps included in GSA’s Toolkit for the Management of Obesity in Older Adults and provides readers with insights into a variety of obesity care guidelines.

The faculty who oversaw the publication’s development include John A. Batsis, MD, FACP, AGSF, FGSA, FTOS, of the University of North Carolina at Chapel Hill; Rodolfo...
From the CEO

12 Easy Ways to Engage in 2024: Pick One Place to Start!

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

Happy New Year! As you formulate your 2024 plans for personal and professional success, your Society has a wonderful array of career and professional growth opportunities to help you advance in your field. I’ve provided a sampling for you to take advantage of over the next twelve months. Pick one to start!

1. Student Internships: Encourage students to consider applying for a GSA summer policy internship program in Washington, DC. Applications are due Wednesday, January 31. An informational webinar is planned for Friday, January 12.

2. GSA/AGHE Fellowship: Nominate a colleague for GSA/AGHE fellow status before the February 15 deadline. The nomination must come from a current fellow in the candidate’s own member group.

3. Annual Scientific Meeting Peer Review and Abstract Submissions: Sign up to serve as a GSA Annual Scientific Meeting abstract peer reviewer from February 1 to 29. Submit abstracts for the GSA 2024 Annual Scientific Meeting (Seattle, November 13-16) beginning February 1, with all abstracts due by March 14. Late breaking abstract opportunities will open up this summer.

4. GSA Awards: Nominate a colleague, or yourself for a GSA award February 1 to March 31.

5. Volunteer as a GSA Leader: Submit a nomination for yourself or a colleague from February 6 to April 8 to serve on the Board of Directors or as a section officer. In subsequent months, we’ll announce other calls for volunteers in June (for Society-wide positions), August (for ESPO positions), and October (for section positions).

6. Join the Careers in Aging Month Vanguard: We’ve designated March as Careers in Aging Month, and we invite you to plan local activities. This can include building awareness of career options in the aging field among current and prospective students at your institution, and recognizing and sharing appreciation for faculty and staff working within the aging field. We have tools to help you be successful.

7. Give Back on Founder’s Day: GSA celebrates its Founder’s Day each May 18, and we invite contributions to section funds that support student involvement in the Society, primarily through the provision of awards for travel and engagement at the GSA Annual Scientific Meeting to present their findings, network with other researchers, and build new collaborations. The Carol Schutz Student and Emerging Scholar Fund also assists travel to the meeting. Applications for travel awards will be accepted this summer. All contributions are tax deductible.

8. Make Plans to Join Us in Seattle: Our 2024 Annual Scientific Meeting is slated for November 13 to 16 in Seattle, Washington, with “The Fortitude Factor” as our theme. You’ll be able to register and make hotel reservations this summer.

9. Join an Interest Group: GSA now has more than 60 active interest groups! This is an ideal way to interact, across disciplines, with colleagues who share your research interest.

10. GSA Journal Peer Reviewer: Engage in your field through our call for peer reviewers for GSA’s journals alongside other volunteer opportunities.

11. Year-Round Programming: With the launch of GSA’s new website, we have a robust events calendar making it easy for you to participate in an array of virtual programming, offered throughout the year. These and many other podcasts, publications, and training resources are freely accessible to all members on our GSA Enrich learning platform.

12. Introduce Colleagues to GSA: As you find reward in all of the above, share your passion for aging and GSA by helping grow the GSA family! We’ve even got a toolkit to help you start the conversation, with the opportunity to be rewarded through our Member Referral Program.

I encourage you to resolve to engage with GSA throughout the year. Wishing you an engaging, rewarding and meaningful 2024!
In Memoriam

Alejandro Garcia, PhD, FGSA, passed away at age 83 on November 17. A professor of social work at Syracuse University since 1978, he was known as an effective advocate for social justice for older Americans, Hispanics, poor people, and many others. He taught gerontology, social policy, and human diversity courses for over 43 years, shaping Falk College’s School of Social Work and generations of students. He held the Jocelyn Falk Endowed Professorship of Social Work at the time of his retirement in 2021.

He was an elected member of the National Academy of Social Insurance, who designated him as a “Social Work Pioneer.” He co-edited three books, including “Elderly Latinos: Issues and Solutions for the 21st Century” (with Marta Sotomayor, 1993), “HIV Affected and Vulnerable Youth Prevention Issues and Approaches” (with Susan Taylor-Brown, 1999), and “La Familia: Traditions and Realities” (with Marta Sotomayor, 1999). He also authored numerous articles and book chapters. He also served on the editorial boards of several social work journals and the Encyclopedia of Social Work.

Over the years, Garcia also served in many other leadership roles, including chair of AARP’s National Policy Council, chair of the National Hispanic Council on Aging, member of the boards at the Syracuse’s Spanish Action League, the Council of Social Work Education, and National Association of Social Workers.

New Books by Members


• “Aging Angry: Making Peace With Rage,” by Amanda Barusch, PhD, FGSA. Published by Oxford University Press, 2023.

Members in the News

• The Washington Post interviewed S. Jay Olshansky, PhD, FGSA, Steven Austad, PhD, FGSA, and Valter Longo, PhD, FGSA, for a November 6 story titled “Aging is a disease: Inside the drive to postpone death indefinitely.”

• Steven Austad, PhD, FGSA, Robyn I. Stone, DrPH, FGSA, Tracey Gendron, PhD, and Cynthia McDowell, MS, were quoted in a November 17 Christian Science Monitor story titled “Letter from Tampa: Aging gets a makeover at this gerontology summit.”

• On November 27, Michal Engelman, PhD, and Yue Qin, MA, were quoted in a Wisconsin State Journal story titled “Wisconsin’s ‘Happy Days cohort’ is helping researchers understand aging.”

• Eileen Crimmins, PhD, FGSA, was quoted in a November 29 NPR story titled “U.S. life expectancy starts to recover after sharp pandemic decline.”

• A December 5 USA Today article titled “Age is a sore spot for Joe Biden. Here’s why Bernie Sanders, Donald Trump don’t face the same scrutiny” featured quotes from Fernando Torres-Gil, PhD, FGSA, and Thomas Jankowski, PhD.

Member Spotlight

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

The current spotlight shines on:

Joel G. Anderson, PhD, CHTP, FGSA

Member Referral Program

This month’s $25 Amazon gift certificate winner:

Odessa Addison, DPT, PhD.

The recipient, who became eligible after referring new member Julie Rekant, DPT, PhD, was randomly selected using randomizer.org.

For more details on the Member Referral Program visit: www.geron.org/referral.

Crain Joins GSA as Visiting Executive

As part of GSA’s Visiting Scholar Program, Kevin Crain has joined the GSA staff as a Visiting Executive as of December 1. Crain has worked with GSA over the last several years as he served in various leadership positions at Bank of America, from which he recently retired as head of retirement research & insights. He also is a former chairperson of the NYC Age Friendly Commission.

Among his responsibilities at GSA, he will work to identify new markets for GSA’s Ageism First Aid training program and conceptualize ways that the consulting and educational programs of the National Center to Reframe Aging could be utilized in new markets.

“I am honored to be engaged with GSA as a Visiting Executive. My thanks to James Appleby and the GSA team for this appointment,” Crain said. “I am excited to partner with the GSA team on advancing their work on ageism and their effort to advance the cause of healthy and productive aging — as evidenced by their leading the national conversation about the positive impact of the longevity economy, countering ageism, and promoting age-friendly communities.”

GSA’s Visiting Scholar Program is open to members able to make a full- or part-time commitment to conduct work on a GSA project related to their area of expertise.
Happy New Year to all my GSA friends and colleagues across the U.S. and around the world! It’s 2024, so I thought that a check-in with Patricia M. “Trish” D’Antonio, BSPharm, MS, MBA, BCGP, GSA’s vice president for policy and professional affairs and executive director of the National Center to Reframe Aging, would be a great way to reflect on 2023.

Brian Lindberg: Looking back at 2023, what were the biggest projects for you and GSA’s policy team this year?

Patricia D’Antonio: The first was continuing our work to provide access to vaccines at no cost in the Medicare Part D and Medicaid programs. We collaborated with colleagues in the Adult Vaccine Access Coalition and the Centers for Medicare & Medicaid Services (CMS) to ensure smooth implementation of the provisions passed at the end of 2022 in the Inflation Reduction Act.

Another was the opportunity to meet with the director of the White House Domestic Policy Council, other federal agencies, and members of Congress to elevate obesity disease management to the forefront to help primary care providers care for people with diabetes, hypertension, osteoarthritis, and many other diseases. GSA along with other members of the Obesity Care Advocacy Network are advocating for the passage of the Treat and Reduce Obesity Act, which will provide CMS with the authority to expand the Medicare benefit for intensive behavioral counseling by allowing additional types of healthcare providers to offer these services. Additionally, it allows the agency to expand Medicare Part D to provide coverage of FDA-approved prescription drugs for the treatment of obesity or for weight loss management for individuals with overweight.

Brian: It’s amazing how much work goes into policy development, education, and advocacy even during a year like 2023 when we knew it would be difficult to get much legislation through both chambers of Congress. How do you approach policy action during a period like this?

Trish: As you know in our roles, it is an honor to advance our members’ research to inform evidence-based policy. GSA is a member of the National Alliance for Caregiving (NAC) and GSA CEO James Appleby, BSPharm, MPH, ScD (Hon) serves as a member of the NAC Board of Directors. We are pleased to support the Act on RAISE Campaign. We are also excited to see that the 2024 Physician Fee Schedule includes provisions to pay for certain caregiver training services in specified circumstances, so that practitioners are appropriately paid for engaging with caregivers to support people with Medicare in carrying out their treatment plans. GSA submitted individual comments and supported other comment letters to CMS on this issue.

Brian: As a pharmacist and health care professional, do you look at the legislative process differently than those of us who studied government affairs or history, for example?

Trish: That’s a great question! As a pharmacist working primarily in geriatrics since undergraduate school, I often look at the legislative process as an opportunity to bring direct care stories to the table. I think about the direct impact and practicalities of implementing legislation for patients, caregivers, and practitioners. My training as a clinician helps me think of consumers, patients, and caregivers in a holistic way. In our coalition advocacy work, I sometimes serve as a bridge between the policy makers and the policy majors, explaining some of the clinical ramifications of provisions in legislation.

Brian: Please share with our readers what it’s like to be an advocate in DC these days post-COVID … what has changed for the better and for the worse?

Trish: It’s evolving, certainly. During COVID, all advocacy events were conducted over Zoom; we are now starting to conduct more visits with Hill staff in person again. What’s really nice is that we can balance the in-person visits with online calls. More policy briefings and coalition meetings are moving to a hybrid setting. It is helpful to be able to be in the room with colleagues. There is more opportunity to engage in person and develop relationships with organization advocacy colleagues. Again, what we learned through COVID is that we can at times conduct the Zoom meetings to include more advocates from beyond the DC Metro area and that makes some engagements richer and more complete.

Brian: You and I have been working with GSA member Mary Lou Ciolfi to produce two-page summaries of the Public Policy & Aging Report (PP&AR). Please explain to folks what we do with those and how we hope to improve our advocacy efforts with them.

Trish: Based on surveys we conducted with policymakers and staff, we learned that while the PP&AR is valuable, a brief describing
Brian: I know you'll never forgive me if I don't give you the opportunity to make a plug for the summer policy internships! What kind of work are you looking to have the interns do this coming year?

Trish: Here is what comes to mind: Our continued support of funding for the National Institutes of Health and National Institute on Aging. Working to ensure support for workforce issues like funding for Geriatric Workforce Education Programs (GWEPs), supporting family caregivers and paid caregivers, and ensuring older people are recognized as members of the workforce. Supporting policy actions that promote key practice issues like adult vaccination, oral health, obesity and overweight, brain health, emergency preparedness, and hearing health.

Brian: How are you at making predictions? Do you think 2024 will bring us any legislative victories?

Trish: I'm an optimist. I think you need to be in this business. We will see some small but mighty victories and will take them where we can. Will legislation cross the finish line this year? Perhaps not as much as we would like. There are also regulatory wins we can watch for too. For example, I would watch how CMS continues to consider dental services inextricably linked to clinical success of Medicare-covered procedures and services in the FY 2025 Physician Fee Schedule. I think we’ll see some progress there. If for nothing else, we’ll have great opportunities this year to amplify the importance of GSA members research and services and supports that benefit us all as we age!

Brian: Thank you so much Trish and I am looking forward to working with you, [Policy and Professional Affairs Coordinator] Karen Homer, and the GSA team again this year.

Recent GSA Policy Actions

GSA Vice President of Policy and Professional Affairs Patricia M. D’Antonio, BSPharm, MS, MBA, BCGP, and GSA Vice President of Strategic Alliances and Integrated Communications Karen Tracy represented GSA at an Obesity Policy Roundtable co-hosted in partnership with the American Diabetes Association and the Obesity Care Advocacy Network. During the event, three expert panels discussed opportunities across the federal government to improve the lives of people living with obesity.

GSA supported a chair’s letter from the Leadership Council of Aging (LCAO) to members of Congress in opposition to two proposed fiscal commissions that would force changes to many programs that older Americans rely on, such as Social Security, Medicare, Medicaid, and other critical government programs. Furthermore, the LCAO strongly encourages Congress to support legislation introduced in this session that increases Social Security and Medicare benefits and extends the solvency of both programs.

GSA joined more than 70 organizations in support of the National Council on Aging’s Medicare low-income outreach and enrollment extension letter, requesting that an extension of the current $50 million annual funding levels for Medicare low-income outreach and enrollment efforts be included in the next congressional funding package.

key points in the issue is helpful when so many publications cross one’s desk each day. We see an opportunity to share these two-page briefs with congressional and administration staff to advance key policy research and inform policy initiatives. These resources will also be included on our website for members to access.

Brian: Every year you and I put together a policy series for the Annual Scientific Meeting. What do you have in mind this year given the timing of the election?

Trish: A key session for this year will provide impact of election results on issues for our members and aging research, practice, and education. Given the Older Americans Act reauthorization in 2024, we will pinpoint how we continue to advocate for services and supports for the aging network. I see us also inviting staff from the Senate Committee on Aging and other key Hill staff to share their thoughts on legislative activities.

Brian: What’s on tap for the National Center to Reframe Aging in 2024?

Trish: Given the conversation around age and politics, we have a tool kit that will be published by the end of the first quarter of 2024 to help colleagues think about how to engage when we hear ageist comments about candidates. We will also be hosting a national dialogue on aging in the spring. Keep an eye out for information in the coming weeks.

Brian: As some of our readers may know, in addition to my work with GSA and NAGE and several other great organizations, I’m now associated with Healthsperien as their vice president for health and aging policy. Maybe we should mention what that may mean for GSA members.

Trish: Well, we think it’s a great opportunity to expand how we can influence policy from an aging perspective. I’m particularly excited that we will be able to launch a policy specific newsletter for members to keep up to date on legislative and regulatory activities in aging. We are excited for you as well as you will be able to share our members’ work with Healthsperien colleagues and clients.

Brian: Trish, what would you say were our top public policy accomplishments since you’ve been with GSA?
spent explaining what this is, and that most likely the uninformed (before this conversation) would personally experience it one day.

GSA’s National Center to Reframe Aging (NCRA) is catalyzing a long-term social movement about what aging means and older persons’ contributions to society. The NCRA team continues to lead the way in addressing ageism and implicit bias towards age. At a conference in late September, I spoke about “The Toll of Ageism: The Pressing Need for Collective Action.” Shortly after this talk, I received an email about Barry Blitt’s “The Race for Office” September 25 The New Yorker cover. Many of us were outraged with this ageist (and ableist) cover and GSA sent a letter to the magazine explaining why the cover was ageist.

More recently, I was leading a virtual seminar for experienced social workers on older adults and palliative care in a national certificate program. I was encouraged by the open conversation about their experiences with ageist assumptions in the healthcare setting (e.g., the older patient’s viewpoint is dismissed), and also by the fact that younger social workers saw ageism directed against people of all ages (e.g. not experienced enough to weigh in on a care plan). For all GSA members, we must retain our “fortitude factor” against ageism and together become involved in this highly important national movement.

I look forward to seeing all of you in Seattle in November for the next GSA Annual Scientific Meeting. I anticipate even more innovations to the meeting that will continue to be increasingly member and family friendly. Our theme, “The Fortitude Factor,” exemplifies how our interdisciplinary community has worked together for almost 80 years and how important our fortitude is needed — at times in the face of unfavorable winds — for the future of gerontology and our Society.

Judith L. Howe, PhD, MPA, FGSA, FAGHE, holds a PhD in social welfare and is professor in the Departments of Geriatrics and Palliative Medicine and Environmental Medicine and Public Health, Icahn School of Medicine at Mount Sinai. She is also associate director/education and evaluation at the Bronx VA Geriatrics Research, Education and Clinical Center.

Her background in public administration, social welfare, and gerontology brings an interdisciplinary perspective to her education, research, mentoring, and program development work. She has received substantial funding from Department of Health and Human Service/Health Resources and Service Administration and the Veterans Affairs (VA) Office of Rural Health to develop, disseminate and evaluate programs to expand the geriatrics workforce, including a large national interdisciplinary program for rural VA healthcare staff.

Her scholarship has produced peer-reviewed papers, chapters and edited books on gerontological social work, interprofessional teamwork, and education and evaluation. Howe's elected positions include president of the National Association for Geriatric Education Centers/National Association for Geriatric Education and President of the State Society on Aging of New York. She has served in multiple roles in GSA, including the Executive and Program Committees. As president and then chair of the Academy for Gerontology in Higher Education (AGHE), she navigated AGHE's integration with GSA. While editor-in-chief of Gerontology and Geriatrics Education, she led the growth of the journal, resulting in significant international and evidence-based contributions to the field.

The Scorecard is made possible by a grant from AARP Foundation, with support from The SCAN Foundation, The Commonwealth Fund, and The John A. Hartford Foundation, and has been updated every three years since 2011.

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.

The Scorecard is used by state and federal policy makers, providers, advocates and other stakeholders to analyze LTSS systems at state levels. The new LTSS Choices website features reports, blogs, videos, podcasts and other resources to showcase innovative models and evidence-based solutions.

AARP Releases New Edition of LTSS State Scorecard

AARP Public Policy Institute has released the fifth edition of the Long-Term Services and Supports State Scorecard and LTSS Choices, a multifaceted project and online resource to catalyze the transformation of the nation's long-term care system for older adults and people with disabilities.

More than three years after the COVID-19 pandemic began, the Scorecard finds that care provided in the US for older adults and people with disabilities is painfully inadequate. Major gaps persist in every state, especially related to support for family caregivers, the long-term care workforce, equity in nursing homes and emergency preparedness. The report offers key recommendations to strengthen support for long-term care and aging at home.

Updates to the Scorecard include Innovation Points, a new way to track leading-edge policies that positively impact LTSS state systems. This edition also delves into new focus areas regarding equity, workforce, and the impact of Covid-19, and can be used to assess areas of strength and improvement for states’ LTSS systems.

The Scorecard is used by state and federal policy makers, providers, advocates and other stakeholders to analyze LTSS systems at state levels. The new LTSS Choices website features reports, blogs, videos, podcasts and other resources to showcase innovative models and evidence-based solutions.

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.

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A Look Ahead: Making the Most of ESPO in 2024

By Molly McHugh BSN, RN, CCRN

As ESPO rings in the new year, we celebrate the successes of 2023 as we make plans to make the most of GSA in 2024! ESPO remains a home for all GSA undergraduate, student, and transitional members. This column aims to highlight some of the standout activities of 2023 and structure a path forward in 2024 for all ESPO members.

ESPO Highlights of 2023

Throughout the year, the ESPO Dissertation and Pre-Proposal Writing Groups provide scholars the opportunity to co-work with other scholars, providing structure, feedback, and opportunities to network with other scholars who are in the same stage of writing as you.

The Annual Scientific Meeting is always the highlight of the year for GSA members. In November, ESPO members connected over the annual ESPO breakfast event and wine and cheese networking reception at the Annual Scientific Meeting in Tampa, where early-career scholars were able to connect and network with their colleagues from across the country. These opportunities to meet scholars support the foundation of a strong collaborative network within GSA.

In December, ESPO hosted a successful webinar on “Mentorship for Early Career Scholars.” This event shared insight into successful transitions into early-career positions, mentorship, and career development. Not only are these webinars an excellent opportunity to learn about topics relevant to early-career scholars, but they also provide an opportunity to connect with peers throughout the year. ESPO routinely hosts spring and fall webinars on rotating topics of interest to early-career scholars, so ESPO members can continue to schedule webinars into the new year!

Making the Most of 2024

The first step in making the most of ESPO opportunities in 2024 is ensuring you stay connected with all things ESPO! Make sure to join the ESPO community on GSA Connect and subscribe to GSA social media accounts to keep on top of all ESPO news.

Although it feels like the last Annual Scientific Meeting is just behind us, it is time to mark your calendars for the 2024 Annual Scientific Meeting in Seattle, Washington, from November 13 to 16. Abstract submissions are currently scheduled to open from February 1 through March 14, with a call for reviewers opening from February 1 to 29. In the summer, keep an eye on GSA Connect and GSA social media accounts for information on late-breaking submission deadlines!

One of the best ways to commit to engaging with ESPO throughout the year is to volunteer! Volunteer opportunities range in commitment from one-day opportunities to multi-year positions. Responsibilities of ESPO volunteers vary based on the role, and opportunities are posted through the year in the GSA portal. Applications for volunteer positions, such as section junior leaders and task force members and co-leads typically open in the fall, but some opportunities are posted year-round.

We look forward to connecting with you throughout 2024! We welcome your suggestions and interest in ESPO at any time: feel free to contact us at espo@geron.org!

Continued from page 1 - Treatment of Obesity Must Be Multifaceted, GSA Publication Says

J. Galindo, MD, FACE, of the University of Miami, UMiami Health System, and Jackson Memorial Health System; Anna Pendrey, MD, of Indiana University; and Kathryn Porter Starr, PhD, RDN, of Duke University School of Medicine and Durham VA Medical Center.

Batsis emphasized the importance of challenging common, biased beliefs about people living with obesity and enhancing the importance of obesity as a disease that needs to be managed accordingly.

“Obesity was designated as a chronic disease by the American Medical Association several years ago,” he said. “The challenge here is whether it really has been implemented and accepted as part of being a chronic disease by healthcare practitioners.”

Batsis added that obesity needs to be viewed along the lines of hypertension, diabetes, high cholesterol, and other comorbidities.

“We need to consider it as a chronic disease, not as a failure of behavioral management among patients across the entire lifespan,” he said. “It’s about biology. Everybody is an individual and with each chronic disease, it’s a biological basis of what triggers the onset of the disease.”

Porter Starr discussed the importance of involving a variety of professionals in the older adult’s care team who can go beyond assessment of physiological and metabolic conditions to address social, environmental, and economic risk factors that often go unrecognized.

“We know that our older adults experience more social isolation than any other population, with over 50 percent of individuals 60 years of age an older being at risk for social isolation. We also know that social isolation may limit the nutrient density and amount of foods that are consumed. So, we may see someone who has obesity who is not actually getting all the nutrients that they need because they’re eating alone and eating prepackaged meals,” she said.

“Transportation is another big issue that we don’t always talk about and ask about. Do people have transportation to and from a grocery store? Do they have the ability to get groceries or carry the groceries? Do they have the ability to be able to prepare food?”

Support for “Insights & Implications in Gerontology: The Chronic Disease of Obesity” was provided by Novo Nordisk.
THANK YOU
To the following GSA members who participated in our Member Referral Program in 2023.
Your support is truly appreciated!


Learn how YOU can win a $25 gift card to Amazon.com!

www.geron.org/referral
GSA Seeks Next Editor-in-Chief for Innovation in Aging

The GSA Program, Publications, and Products Committee is announcing a search for the position of editor-in-chief of its peer-reviewed, fully open access journal, Innovation in Aging. The four-year contract term for the position will become effective January 1, 2025. Transitions will begin as early as October 2024. The editor-in-chief works closely with publishing staff, Editorial Board, and at times directly with authors, reviewers, and readers for the benefit of the journal and the Society. The editor-in-chief proposes the editorial plan and exercises editorial independence in selection of content with advice and guidance provided by the Editorial Board, Oxford University Press, and GSA. The editorship is a voluntary position with an institutional editorial office stipend. Candidates must be dedicated to developing a premier scientific journal.

All nominations and applications must be emailed to Judie Lieu, GSA vice president of publishing and professional resources, at jlieu@geron.org by April 30. Selected candidates will be interviewed by an Editor-in-Chief Search Workgroup in June.

Innovation in Aging Special Issue Looks at Translational Pain Research

The articles in a new special issue of Innovation in Aging, “Translational Research on Pain and Pain Management in Later Life,” address several important knowledge gaps. M. Cary Reid, MD, PhD and Karl Pillemer, PhD, FGSA, at Cornell University served as guest co-editors.

“Areas to be investigated include developing better ways to measure pain and its impact, expanding our understanding of the effects of social, biological, and psychological factors on pain, and exploring the pain management practices employed by older adults. Further, given the continued high prevalence and burden of pain in older persons, and the movement away from primary reliance on pharmacologic treatments, it is important to develop, test, and disseminate behavioral treatment interventions for pain relief and management. The studies point to the promise and challenge of translational research on later-life pain and highlight the need to translate basic knowledge about pain to scalable, evidence-based approaches that can serve to prevent and treat a major public health challenge of the 21st century,” the editors wrote.

GSA Journals Have Several Open Calls for Papers

The GSA journals regularly invite submissions for special themed issues and sections. Browse our open calls for papers below and consider submitting your research to one of our leading journals:

The Journals of Gerontology, Series A: Biological Sciences and Medical Sciences

- The Impact of Climate Change and Air Quality on Human Aging (Abstracts due March 1)
- Translational Geroscience (Rolling submissions; no submission deadline)

The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences

- Family Diversity and Dynamics among Older Adults in the 21st Century (Coming soon)

The Gerontologist

- Bridging Aging and Disability Research (Abstracts due February 1)

Innovation in Aging

- Innovations to Destigmatize Fecal Incontinence (Abstracts due February 1)

Gerontology & Geriatrics Education

- Diversity, Equity & Inclusion in Gerontology & Geriatrics Education (Manuscripts due June 1)
- Technology and Artificial Intelligence in Gerontological Education (Manuscripts due July 1)
- Education’s Role in Gerontology & Geriatrics Workforce Development (Rolling submissions; no submission deadline)
- Gerontology & Geriatrics Classroom Best Practices (Rolling submissions; no submission deadline)

GSA 2023 Program Abstracts Now Online

The GSA 2023 Annual Scientific Meeting program abstracts have been published in a supplement issue of GSA's open access journal, Innovation in Aging. This includes all accepted program abstracts, including late breaking abstracts.

Latest Public Policy & Aging Report Examines Sex Differences

This latest issue of Public Policy & Aging Report, organized by the leadership of the GSA’s Biological Sciences Section, is titled “Sex Differences in Aging Research, Healthcare, and Policy.” It highlights studies in biomedical research on sex differences in aging and their policy implications. In addition to the impact of menopause on the health of older women, the issue addresses sex differences in longevity and resilience; in immune aging and the responsiveness to vaccination; in interactions among gut microbiome, the brain, and innate defense mechanisms against disease; in geriatric pharmacology; and in treatment of late-life depression.

Special Issue of The Gerontologist Examines Humanities-Gerontology Perspectives

The Gerontologist’s latest special issue, “Interdisciplinary Pathways: Humanities, Arts, and Gerontology,” asks questions about the relationship between the humanities and gerontology and how each have shaped and cross each other’s horizons of research. Ulla Kriebneregg, PhD, Sally Chivers, PhD, and Stephen Katz, PhD, served as guest co-editors.

“Humanities scholars have adapted gerontological insights, ideas, data and anti-ageist critiques, while gerontologists borrow from the humanities, its theories, methods, futuristic speculations, and imaginative poetics. Thus, the issue is both a reflexive account of gerontology’s historical roots in the humanities and a critical assessment of current humanities-gerontology perspectives. Organized into three sub-areas, ‘methodological bridges,’ ‘literary visions,’ and ‘voices of everyday aging,’ the articles are fascinating explorations into the meaning and diversity of age, the care and inclusion of older people, and the limits and opportunities for aging well,” the editors wrote.
As the incoming chair of GSA’s Academy for Gerontology in Higher Education (AGHE), I’m thrilled to continue the fantastic work of my predecessors — most recently Joann Montepare, Dana Burr Bradley, and Judy Howe. AGHE has changed significantly over the past several years, yet we continue offering leading-edge resources for gerontology and geriatrics education.

In 2023, restructuring of the former Academic Program Development Workgroup into two new workgroups — the Program Resources Development Workgroup, PRDW, chaired by Mary Ann Erickson, and the Educational Resources Development Workgroup, ERDW, chaired by Lisa Borrero — has helped to streamline AGHE’s efforts and create opportunities for additional volunteer involvement.

The Communications Workgroup has revised how the AGHExchange (edited by Aaron Guest) is delivered, providing just the right amount of information at the right time. Adding Britteny Howell as associate editor will ensure the continuity of delivery of this amazing educational resource over time. The Advancement Workgroup, chaired by Kara Dassel, has worked hard to create and expand opportunities to highlight careers in aging, which we will celebrate in March 2024 during Careers in Aging Month.

Thanks to everyone who contributed to AGHE’s Tree of Knowledge campaign, as those funds are used to support small grants for Careers in Aging Month activities. We welcome your continued support!

I look forward to seeing what these amazing groups will continue to do in the coming year! As AGHE chair, I am excited to work to build bridges to other sections of the Society. An initial effort was the AGHE Presidential Symposium at the Annual Scientific Meeting in Tampa in November 2023. Titled “Educational Needs and Strategies Across GSA: Building Bridges Within the Society,” the symposium included representatives from the Social Research, Policy and Practice Section; Behavioral and Social Sciences Section; Health Sciences Section; and Biological Sciences Section, who shared about great projects underway in each section. Discussant Joann Montepare suggested that AGHE invite representatives from each section to liaise with the AGHE leadership team. Such connection will help ensure the entire Society is aware of the resources available through AGHE, foster opportunities to collaborate on educational initiatives and reduce redundancy in education-related efforts.

I look forward to piloting a liaison program in 2024 and to strengthening AGHE’s connections to other sections within GSA. I hope you all will contribute to and take advantage of AGHE’s efforts and resources as we are all educators, whether we teach in a traditional or online classroom setting, train/mentor students or new colleagues, or engage in advocacy efforts to promote an age-inclusive society. AGHE has lots to offer to everyone and the field!

Thoughts from the Incoming AGHE Chair: A Look Back at 2023 and Forward to 2024

By Tina M. K. Newsham, PhD, FAGHE, Chair, Academy for Gerontology in Higher Education; and Professor of Gerontology, School of Health and Applied Sciences at University of North Carolina Wilmington

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**funding opportunities**

**NIDUS II Pilot Grants Will Support Delirium Research**

The Network for Investigation of Delirium: Unifying Scientists (NIDUS II) will be offering two $40,000 pilot grants for collaborative research projects related to delirium. The deadline for pilot award letters of intent has been extended to Monday, February 5.

**EdDem Welcomes Pilot Proposals on Education-Dementia Relationship**

The Network on Education, Biosocial Pathways, and Dementia across Diverse Populations (EdDem), funded by the National Institute on Aging, has announced its 2024 request for pilot proposals that will advance science in the education-dementia relationship in one of three critical areas: early life factors and the education-dementia relationship; mid-life socioeconomic, social, and psychological mediators of education and dementia; biological mechanisms linking education to dementia. Proposals are due February 5.

**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.

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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.

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)

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.

• Friday, January 12, 2024, 2 to 3 p.m. ET
• Thursday, February 1, 2024, 2 to 3 p.m. ET (This session is focused on the VA track)
• Wednesday, March 13, 2024, 12 to 1 p.m. ET
• Wednesday, March 27, 2024, 1 to 2 p.m. ET

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

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

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