GSA has received renewed grant support to welcome a 15th class of reporters for the Journalists in Aging Fellows Program. The 2024 funders to date include Silver Century Foundation, The John A. Hartford Foundation, and National Institute for Health Care Management Foundation (NIHCM).

Since its founding in 2010, this program has been responsible for more than 800 news stories produced by 231 alumni. It has two goals: to educate journalists about issues in aging, better allowing them to spread a new awareness to general-audience, ethnic, and other minority populations; and to disseminate information about new scientific findings, policy debates, innovations, and evidence-based solutions.

“We are grateful for the support of our partners in helping journalists tell accurate, fact-based stories about aging,” said Todd Kluss, GSA’s director of communications. “We consistently receive the highest positive feedback from our fellows on their experiences, and their work continues to have a positive impact in diverse communities nationwide.”

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

“Age is so much more than just a number, and informing journalists about the many facets of aging is a key goal of this fellowship,” Seegert said.
From the CEO

Advocating for the Field, Amplifying Member Voices in Washington

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

As GSA enters its 80th year as the leading multidisciplinary professional membership society in the aging field, it has a more robust presence in the advocacy arena than at any time in its history. GSA’s offices were moved to Washington, DC (from our original home at Washington University in St. Louis) in 1970 (four years before the establishment of the National Institute on Aging) to enable the Society to be more effective in shaping federal policy on aging-related issues.

Influencing positive policy change to improve the lives of older people is important to GSA members, but it’s sometimes difficult for individual members to feel they are having an impact. As a member of GSA, you are part of a 5,500-member Society of experts on aging. Together, we leverage the collective power of our large membership to amplify the Society’s voice on policy issues. This power is often added to the activities of the dozens of organizational coalitions GSA participates in to bring about meaningful policy change.

As noted in this month’s cover story, GSA recently hosted a Capitol Hill briefing on the importance of treating obesity, a condition that affects 42 percent of American adults and 41 percent of Americans aged 65 to 74. Individual GSA member experts and staffers are the best spokespersons on specific issues, and having GSA as a platform with which to do advocacy makes them stronger. Congratulations to GSA members Kathryn Porter Starr and Michael G. Knight, GSA Director of Strategic Alliances Jen Pettis, and GSA Vice President of Policy and Professional Affairs Patricia “Trish” D’Antonio for sharing their expert insights on this issue with the many congressional staff members attending the briefing.

This is a front-burner item right now as GSA has joined other organizations in advocating for passage of the Treat and Reduce Obesity Act. This critical bipartisan legislation will provide Medicare beneficiaries with access to additional treatment tools to address overweight and obesity as we age. Elevating obesity disease management to the forefront will help primary care providers care for people with many other chronic diseases of aging including diabetes, hypertension, osteoarthritis, and many other diseases.

To keep members updated on policy and advocacy activities, you’ll find a Recent Policy Actions section on page 5 of every issue of Gerontology News, and our website provides a greater scope of all the activities we’re undertaking on members’ behalf. GSA members are often invited by Congress to testify in Senate or House hearings as well. If you have the opportunity to do so, please let us know in advance so the GSA team can support you through this exciting and rewarding process.

While policy change takes time, we are making a difference. A great example was our push for a key provision in 2022’s Inflation Reduction Act, which closed longstanding gaps in vaccination coverage in Medicare and Medicaid and increased access to these disease preventing treatments. We continue our push to eliminate barriers to access to vaccines by advocating for coverage for uninsured people and an improved immunization information system. Working with the Oral Health Consortium, we successfully advocated for Medicare to cover certain dental procedures that are inextricably linked to the clinical success of other Medicare-covered procedures and services. And as discussed in Policy News on page 4, we are ongoing champions for reauthorization of the Older Americans Act.

I’d like to congratulate Trish on a job exceedingly well done as she wraps up a two-year term as chair of the Friends of

Continued on page 15
Members in the News

- On May 4, Nancy Kusmaul, PhD, MSW, FGSA, authored an op-ed in The Baltimore Sun titled “Let’s cut out ageism, idea of getting too old.”
- On May 16, The New York Times quoted William E. Haley, PhD, FGSA, FAGHE, in an article titled “How to Care for Yourself as a Caregiver.”
- A May 19 article in Caregiving magazine titled “Over the Threshold: Creating Solutions” quoted Tam Perry, PhD, FGSA.
- On May 29, Clara Berridge, PhD, MSW, was interviewed on BBC radio 4’s show, The Artificial Human for a segment titled “The Artificial Human, Can AI Look After Me in Old Age?” She was also quoted in an April 25 Nature article titled “Are robots the solution to the crisis in older-person care?”

Member Spotlight

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

Member Referral Program

This month’s $25 Amazon gift certificate winner:

Wendy Rogers, PhD, FGSA

The recipient, who became eligible after referring new member Renato Ferreira Leitao Azevedo, MS, PhD, was randomly selected using randomizer.org.

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

Shuman Earns Minneapolis Dental Honor

Stephen Shuman, DDS, MS, FGSA, was the 2024 Guest of Honor for the Minneapolis District Dental Society (MDDS) on April 15. Shuman was chosen “for his exceptional contribution to the field of geriatric dentistry,” according to MDDS. He currently is a professor, director of the Division of Hospital and Special Care Dentistry, and director of the Oral Health Services for Older Adults Program in the School of Dentistry.

Krause Bestowed with AAAS Fellow Status

Neal Krause, PhD, FGSA, has been named a fellow for the American Association for the Advancement of Science (AAAS). Election as a fellow honors members whose efforts on behalf of the advancement of science or its applications in service to society have distinguished them among their peers and colleagues. Krause is the Marshall H. Becker Collegiate Professor Emeritus in the Department of Health Behavior and Health Education at the University of Michigan School of Public Health. He was the 2017 recipient of GSA’s Robert W. Kleemeier Award.

Arts and Sciences Academy Welcomes Carr as Member

Deborah Carr, PhD, FGSA, has been named a member of the American Academy of Arts and Sciences, which convenes leaders from across disciplines, professions, and perspectives to address significant challenges. She is currently a professor of sociology at Boston University’s College of Arts & Sciences and director of the Center for Innovation in Social Science. She also is a former editor-in-chief of the social sciences section of The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences.

Jensen Named to California Commission on Aging

Jamie Jensen, PhD, MSW, has been appointed by Governor Gavin Newsom to the California Commission on Aging. She has been owner and consultant of HealingOrgs.com since 2014 and an associate professor at California State Polytechnic University, Humboldt since 2008. The commission serves as the principal advocate in the state on behalf of older individuals.

AANP Honors Resnick with Legacy Award

The American Association of Nurse Practitioners (AANP) has named Past GSA President Barbara Resnick, PhD, CRNP, FAAN, FAANP, FGSA, as the 2024 recipient of its Legacy Award. This distinction honors, recognizes, and memorializes a member of FAANP whose lifelong career has had a profound and enduring impact on the profession and the NP role. Resnick is a distinguished university professor, associate dean of research and scholarship and holds the Sonya Ziporkin Gershonowitz Chair in Gerontology at the University of Maryland School of Nursing. She previously earned GSA’s Doris Schwartz Gerontological Nursing Award and M. Powell Lawton Award.

Kim Earns Harvard Mentoring Award

Harvard Medical School (HMS) has named Dae Hyun Kim, MD, ScD, as the recipient of the 2024 A. Clifford Barger Excellence in Mentoring Award. Kim is an associate scientist at the Hinda and Arthur Marcus Institute for Aging Research at Hebrew SeniorLife, an HMS associate professor of medicine, a geriatrician at the Division of Gerontology in the Department of Medicine at Beth Israel Deaconess Medical Center, and a Harvard School of Public Health Instructor in the Department of Epidemiology. The award was established to recognize the value of quality mentoring relationships and the impact they have on professional development and career advancement in basic/clinical medicine, research, teaching, and administration.

Benayoun Bestowed with Cristofalo Award

University of Southern California (USC) Leonard Davis School of Gerontology Associate Professor Bérénice Benayoun, PhD, has earned the 2024 Vincent Cristofalo Rising Star in Aging Research Award from the American Federation for Aging Research. Benayoun has appointments in biological sciences, biochemistry and molecular medicine at USC.
Reauthorizing a Foundational Law for Older Americans: Part 2

The reauthorization of the Older Americans Act (OAA) is of critical importance to all of us since the OAA is one of the legs of the three-legged stool supporting us as we age (with Medicare and Social Security as the other two legs). Last month, I provided an overview of the OAA’s history and the authorization and appropriation processes, and reported on the legislation that has been introduced and hearings that have been conducted to highlight the impact of the OAA’s programs and services.

In this column, I update the legislative proposals and provide a view of some of the wish lists of the ways that advocates in the aging network would like to see the OAA amended to improve its effectiveness, efficiency, and scope.

Here are a few more bills that are now on the table for consideration. Senator Mike Braun (R-IN), ranking member of the Senate Special Committee on Aging, introduced the following four bills on June 18. They were all referred to the Senate Committee on Health, Education, Labor, and Pensions (HELP):

- **S.4577**, a bill to amend the Older Americans Act of 1965 to require the assistant secretary for aging to publish on an online portal information on national resource centers authorized or supported under such Act.
- **S.4578**, a bill to amend the Older Americans Act of 1965 to require reports to Congress on State Long-Term Care Ombudsman Programs.
- **S.4574**: a bill to amend the Older Americans Act of 1965 to allow states, tribal organizations, and organizations serving Native Hawaiians flexibility to use certain funds for innovative nutrition services.
- **S.4575**: a bill to amend the Older Americans Act of 1965 to require the assistant secretary for aging to make available to states, area agencies on aging (AAA), and service providers information and technical assistance to support the provision of evidence-informed practices that are likely to improve health outcomes. Senator Ed Markey (D-MA) introduced **S.4613**, a bill to amend the Older Americans Act of 1965, to establish the Office of LGBTQI Inclusion and a rural outreach grant program.

Another bill introduced to amend the OAA also focuses on a specific group of older people: **S.4273**, the Enhancing Native Elders’ Longevity, Dignity, Empowerment, and Respect (Native ELDER) Act. Introduced by Senators Lisa Murkowski (R-AK) and Tina Smith (D-MN), this bill would prioritize home modifications, training programs for home care, and support for family caregivers for Alaska Native, American Indian, and Native Hawaiian Elders. Brian Ridley, chief of Tanana Chiefs Conference in Alaska, pointed out in a press release, “Our culture puts great emphasis on elder care. Our elders should have the ability to pass down traditional knowledge and values in the safety and comfort of their homes.”

### Wish Lists for OAA Reauthorization

- **Coalition to Transform Advanced Care (C-TAC)**: In its request to the Senate HELP Committee, C-TAC, the organization that advocates for people with serious illness and their caregivers, pointed out that the OAA does not include explicit definitions of advance care planning or serious illness. It would be especially appropriate to see these terms in the definitions of services provided by Aging and Disability Resource Centers, case management services, and information and assistance services. Another ask is a new grant program for AAAs and other aging-focused nonprofits to support initiatives related to serious illness care and advance care planning which would enhance the services for these older adults in current programs, such as the Geriatric Workforce Enhancement Programs and telehealth programs.

- **Coalition to End Social Isolation and Loneliness (CESIL)**: CESIL’s priorities for the reauthorization of the OAA include increasing authorized funding levels for all OAA programs to expand the Aging Network’s capacity to address social isolation and loneliness. In addition, CESIL supports the creation of a resource center dedicated to addressing social isolation and loneliness.

- **National Association of State Ombudsman Programs (NASOP)**: NASOP advocates for three specific provisions this year. One is an increase in funding for the ombudsman program under Title VII to $187.5 million. The work of the ombudsman program is labor intensive — it is essentially person-to-person, so funding would increase the number of ombudsmen who could carry out their advocacy and protection function for residents of care facilities. The second is a request that ACL hire a full-time national director of ombudsman programs who reports directly to the assistant secretary. This is already in the OAA statute but has not been implemented in recent years by the Administration for Community Living (ACL). Thirdly, NASOP requests a technical change in the reference year so that the future minimum allotment for states is based on the most recent budget year.

- **Meals on Wheels America**: This organization supports approximately 5,000 community-based programs around the country that provide nutrition and social connection to older adults. In the OAA reauthorization, Meals on Wheels would like to see the congregate and home-delivered meals programs unified under a single Title III-C program and funding stream which would improve the efficiency and flexibility of local providers to meet the needs of older people.
Aging and Vision Loss National Coalition (AVLNC):
The AVLNC is a consortium of national, regional, and community-based advocacy and service providers for older people who are blind or have low vision. The coalition would like to secure recognition of three distinct populations in the OAA: older individuals with vision loss, individuals with hearing loss, and individuals with dual sensory loss (vision and hearing). In addition, AVLNC would like vision rehabilitation services to be defined in the OAA reauthorization at appropriate points and these services to be incorporated into discussions of services for older people. The AVLNC requests establishing an Office of Aging and Vision Loss, and more resources and demonstrations from ACL.

USAGing: USAGing is the national organization that represents the Area Agencies on Aging and Native American Aging Programs that serve as the heart of community-based programs. USAGing developed a comprehensive set of recommendations for amending the OAA, including increasing funding levels across all titles of the act, particularly for people in rural areas, Native Americans, and historically underserved populations.

Beyond funding, USAGing requests the flexibility to use evidence-informed programming in addition to evidence-based practices. They argue that higher cost and strict fidelity of evidence-based programs creates barriers for smaller or less-resourced AAAs to providing beneficial services to their clients. USAGing also promotes codifying in law a national resource center focusing on training and technical assistance on social engagement. It also requests an increase of two percent in the administrative funding ceiling and clarification of rules for contracting with outside providers.

This year most OAA advocates are prioritizing much higher funding levels, but the real funding power remains with the appropriators and the leadership of the majority and minority parties in the House and Senate, who must cut a deal with each other and the White House each year. The OAA is a small fish in a $6 trillion pond. To provide a sense of the level of support for community-based services for older adults under the OAA versus other health care spending, in FY 2022 we spent $944.3 billion on Medicare and $805.7 billion on Medicaid in 2023 and only $2,372 billion in FY 2024 for OAA programs.

GSA and the Process
I may have thrown a lot of information your way with these two articles but hopefully it gives you a sense of what happens with laws as they go through the reauthorization process every few years. GSA is quite involved in discussions about many programs as they are renewed or created through direct education and advocacy and through our participation in coalitions.

Regarding the OAA, we have collaborated with the National Council on Aging, Advancing States, and USAGing to protect, strengthen, and secure a higher funding authorization of the Research, Demonstration, and Evaluation Center for the Aging Network. You may recall that we drafted the original text for this center last reauthorization, and the center has received funding of $5 million each of the past two years. GSA has also been providing input to several senate offices and committees, and endorsing several OAA legislative proposals, including bills that would provide financial planning assistance for caregivers, create a caregiver demonstration center, support home modification projects, expand the sharing of data for the Long-Term Care Ombudsman Program, fund outreach to the LGBTQI population, and authorize higher appropriations levels for all the titles of the Act.

After all this work by staff, members, and advocates, will we actually see an OAA bill become law this year? The Senate is running months behind its original game plan, the House is very quiet on the issue, and there are some bigger fish to fry this election year.

The Senate HELP Committee and Special Committee on Aging still hope to share a draft bill for feedback in mid-July with a mark-up to follow toward the end of the month. That would leave September and the lame duck to get the full Senate and House to pass a bill. This is not likely, but still possible, particularly if the House Education and Workforce Committee decides to rely on the bipartisan process in the Senate for most of its bill development.

Thanks to the many GSA members who have done groundbreaking research and analysis over the years that has led to or improved many of the OAA programs that serve millions of older adults each year!

Recent GSA Policy Actions
GSA Vice President of Policy and Professional Affairs Patricia D’Antonio, BSPharm, MS, MBA, BCGP, GSA Director of Policy Jordan Miles, and GSA Obesity and Aging Interest Group Co-Convenor Katie Starr, PhD, RDN, visited Capitol Hill to educate members of Congress on the importance of passing the Treat and Reduce Obesity Act (S. 2407/HR 4818).

GSA Vice President of Policy and Professional Affairs Patricia D’Antonio, BSPharm, MS, MBA, BCGP, served as moderator for a recent Adult Vaccine Access Coalition (AVAC) Capitol Hill briefing on vaccine infrastructure. D’Antonio serves as co-chair of AVAC.

GSA signed on to several advocacy letters through its coalitions:
• Appropriations letters with the Leadership Council of Aging Organizations, Active People Healthy Nation and SPAN, and Leaders Engaged on Alzheimer’s Disease (LEAD) Coalition calling for increased funding for the Older Americans Act, Social Security, Centers for Disease Control, etc.
• AVAC letter to the Centers for Medicare and Medicaid (CMS) supporting adult vaccination status measure in quality reporting updates, and a second letter to CMS calling for continued COVID-19 provisions.
• Meals on Wheels of America, National Council on Aging, and National Association of Nutrition and Aging Services Programs letter urging advancement of a Farm Bill without cuts.
Experts Develop Strategies for Successful Care of Older Adults with Obesity

As identified by the interdisciplinary expert summit participants, the seven strategies to address barriers to quality obesity care for older adults are:

1. Inform and educate about obesity as a chronic disease, requiring care across the lifespan.
2. Address weight bias and stigma among health providers and the public.
3. Use person-first language when referring to someone who has obesity.
4. Respect and honor cultural considerations about body size.
5. Engineer environments of care to accommodate people of all body sizes.
6. Ensure access to the full range of care for older adults with obesity: diet, exercise, behavioral modification, and medical and surgical interventions.
7. Incorporate an interprofessional, evidence-based approach to caring for older adults who have obesity.

The findings of the paper also were featured at a June 13, 2024, briefing on Capitol Hill. Starr was joined by Michael G. Knight, MD, MSHP, from The George Washington University Medical Faculty Associates, GSA Director of Strategic Alliances Jen Pettis, MS, RN, CNE, and GSA Vice President of Policy and Professional Affairs Patricia M. D’Antonio, BSPharm, MS, MBA, BCGP, who moderated the briefing.

The summit and white paper were developed by GSA with the support of Novo Nordisk.
SRPP Section Encourages Applications for Student Travel Awards; SRPP/ESPO Symposium Planned for Seattle

By Taylor Jansen, PhD

My name is Taylor Jansen and I am currently serving in my first year as the Social Research, Policy, and Practice (SRPP) Section junior leader. I am a post-doctoral fellow for Dr. Elizabeth Dugan and the Healthy Aging Data Report team in the Gerontology Department at the University of Massachusetts Boston. The SRPP leadership team and section volunteers are currently working hard to put on some great learning and networking opportunities for our members. In the spring we held our first event, a webinar titled “SRPP Award Recipient Spotlight” aimed at showcasing last year’s SRPP award winners from the 2023 Annual Scientific Meeting. This event was a great success and attendees heard from Drs. Bei Wu (Maxwell A. Pollack Award), James Luben (Barbara Berkman Award), Sara Bybee (Carroll L. Estes Rising Star Award), and Roberta Flack (Elaine M. Brody Thought Leader Award) about their career trajectories and their advice for career advancement.

In July, we will host a summer happy hour for our members to connect informally prior to the Annual Scientific Meeting. Keep an eye out for forthcoming details on GSA Connect!

The SRPP Section is committed to supporting our early career members. If you are an early career SRPP member, please consider applying for the many student travel awards offered through SRPP to support travel to the 2024 GSA Annual Scientific Meeting in Seattle. In addition, the SRPP leadership has been working on facilitating more networking opportunities between our early career members and our longstanding members.

We have heard from ESPO members that they are attending the Annual Scientific Meeting with the goal of meeting their fellow research colleagues and growing their networks, but they need more formal assistance to reach this goal. We are currently working on hosting a networking event at the annual meeting this year aimed at connecting ESPO members with SRPP members based on their research and career interests. To ensure we are meeting the needs of our early career members, we plan on sending out a survey to the ESPO/SRPP members in the fall. Please watch for that and share your mentorship/networking needs with us so we can facilitate personal connections ahead of the annual meeting. Stayed tuned!

Finally, we are thrilled to announce the speakers for the 2024 ESPO/SRPP Symposium titled “Going the Extra Mile: How Pioneering Gerontologists Translate Research to Policy and Practice.” We will hear from Dr. Kina White, from the Mississippi State Department of Health, who will speak about her successful dissemination efforts informing state policymakers and health professionals of recent research conducted on older Mississippians. Dr. Howard Degenholtz, a professor at the University of Pittsburgh, will speak about his recent work with the Pennsylvania Department of Aging to develop a 10-year statewide plan. Lastly, we will hear from Dr. Sheryl Zimmerman about her work at the national Center for Excellence in Assisted Living to strengthen connections between research, practice, and policy, and related advocacy at the federal level. Overall, the aim of this symposium is to answer the “so what” question that many students and researchers are presented with and motivate gerontologists to broaden their dissemination and advocacy efforts to have the most positive impact on our society, whether in research, policy, or practice. We think this symposium will be of great interest to our members and are looking forward to seeing you in Seattle!

Continued from page 1 - Fellowships Will Advance Reporters’ Coverage of Aging in America

“We look forward to welcoming our next cohort of fellows to learn more about this fascinating and multi-dimensional topic.”

The program’s co-founder, Journalists Network on Generations National Coordinator Paul Kleyman, serves as senior advisor and editorial consultant.

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

The program’s in-person activities will bring the fellows to GSA’s 2024 Annual Scientific Meeting, which will take place from November 13 to 16 in Seattle, Washington, with the theme of “The Fortitude Factor.” There the fellows will participate in an exclusive educational workshop, which will showcase demographic trends and research highlights and include discussions with veteran journalists on how to position aging stories in the current media environment.

The fellowship requires reporters to deliver two projects based on current aging research, including a short-initial story and major piece or series in the following months. All applications for the fellowship program will be reviewed by a selection committee of gerontologists and editorial professionals. The criteria will include clarity and originality of proposed in-depth story projects; quality of samples of published or produced work; and high-impact potential of proposals geographically and across different ethnic or racial populations.
GSA Honors Outstanding Individuals

Please join us in congratulating our 2024 awardees!

GSA salutes outstanding research, recognizes distinguished leadership in teaching and service, and fosters new ideas through a host of awards. Nominated by their peers, the recipients’ achievements serve as milestones in the history and development of gerontology.

The awardees will be recognized at this year’s GSA Annual Scientific Meeting, taking place November 13 to 16 in Seattle, Washington. Check the final meeting program for all dates, times, and room location assignments for award events.

SOCIETY-WIDE AWARDS

Donald P. Kent Award
Peter A. Lichtenberg, PhD, FGSA
Wayne State University

Robert W. Kleemeier Award
Jiska Cohen-Mansfield, PhD, FGSA
Tel-Aviv University

James Jackson Outstanding Mentorship Award
Lisa L. Barnes, PhD, FGSA
Rush University Medical Center

M. Powell Lawton Award
Stephen M. Golant, PhD, FGSA
University of Florida

Maxwell A. Pollack Award for Productive Aging
Edward Alan Miller, PhD, MPA, FGSA
University of Massachusetts Boston

Doris Schwartz Gerontological Nursing Research Award
Christine Mueller, PhD, RN, FGSA, FAAN
University of Minnesota School of Nursing

Margret M. and Paul B. Baltes Foundation Award
Nicole E. Werner, PhD
Indiana University School of Public Health-Bloomington
2024 awardees

ACADEMY FOR GERONTOLOGY IN HIGHER EDUCATION

Clark Tibbitts Award
Joann M. Montepare, PhD, FGSA, FAGHE
Lasell University

Hiram J. Friedsam Mentorship Award
Dana Burr Bradley, PhD, FGSA, FAGHE
University of Maryland Baltimore County

Distinguished Faculty Award
Lyn M. Holley, PhD, FAGHE
University of Nebraska at Omaha

Rising Star Early Career Faculty Award
Yeonjung Jane Lee, PhD
University of Hawai‘i at Mānoa

Student Leadership Award
Yan-Jhu Su, BA, MA
University of Massachusetts Boston

Book Award for Best Children’s Literature on Aging
“Abuelita and Me” by Leonarda Carranza and illustrated by Rafail Mayani
Annick Press

Book Award for Best Children’s Literature on Aging
“Grandad’s Pride” by Harry Woodgate
Little Bee Books
2024 awardees

BEHAVIORAL AND SOCIAL SCIENCES SECTION

Distinguished Career Contribution to Gerontology Award
Kimberly S. VanHaitsma, PhD, FGSA
Pennsylvania State University

Richard Kalish Innovative Publication Award — Book
Ken Chih-Yan Sun, PhD
Villanova University

Richard Kalish Innovative Publication Award — Article
Oliver Huxhold, PhD
German Centre of Gerontology

Richard Kalish Innovative Publication Award — Article
Anne Barrett, PhD, FGSA
Florida State University

Distinguished Mentorship in Gerontology Award
David Manuel Almeida, PhD, FGSA
Pennsylvania State University

BIOLOGICAL SCIENCES

Nathan Shock New Investigator Award
Cristal Hill, PhD
University of Southern California

Nathan Shock New Investigator Award
Sarah R. Ocañas, PhD
Oklahoma Medical Research Foundation

HEALTH SCIENCES SECTION

Excellence in Rehabilitation of Aging Persons Award
Roger A. Fielding, PhD, FGSA
Tufts University

Mid-Career Innovation Award
Megan Huisingsh-Scheetz, MD, MPH, AGSF, FGSA
University of Chicago
Barbara J. Berkman Award for Outstanding Interdisciplinary Research, Practice, or Policy in Aging and Health Care
Judith G. Gonyea, PhD, FGSA
Boston University

Carroll L. Estes Rising Star Award
Angie Perone, PhD, JD, MSW, MA
University of California Berkeley

Elaine M. Brody Thought Leader Award
Nancy Kusmaul, PhD, MSW, FGSA
University of Maryland Baltimore County

GSA thanks the following award sponsors:
The New York Community Trust (Pollack Award)
Margret M. & Paul B. Baltes Foundation (Baltes Award)
Barbara J. Berkman, DSW/PhD, FGSA (Berkman Award)

Additionally, the following award nominations, along with a variety of travel awards, are open until July 29:

Academy for Gerontology in Higher Education
Mildred M. Seltzer Distinguished Service Honor
Part-Time/Adjunct Faculty Honor
Administrative Leadership Honor
Graduate Student Paper Award
James McKenney Student Travel Award
AGHE Student Travel Stipend

Behavioral and Social Sciences Section
Student Research Award
Boaz Kahana Student Poster Award
Behavioral and Social Sciences Student Travel Stipend

Biological Sciences Section
George Sacher Award
Austin Bloch Award
Biological Sciences Student Travel Stipend

Emerging Scholar and Professional Organization Interdisciplinary Paper Award

Poster Award
Douglas Holmes Award
Minority Issues in Gerontology Poster Award
Carol A. Schutz Travel Award
TJ McCallum Memorial Student Travel Award

Health Sciences Section
Joseph T. Freeman Award
Person-In-Training Award
Research Award
Health Sciences Student Travel Stipend

Social Research, Policy, and Practice Section
Outstanding Student Poster Award
Social Research, Policy, and Practice Student Travel Stipend

To learn more about GSA awards and for more information about our 2024 summer award nominations, visit www.geron.org/membership/awards.
Distinguished Members Granted Fellow Status

GSA’s Board of Directors has approved the following 60 individuals for fellow status within the Society. In addition to being honored during the Fellows, International, and ESPO Reception at the Annual Scientific Meeting, they will be presented with fellow certificates and pins at their respective section recognition events.

Fellow status is peer recognition for outstanding contributions to the field of gerontology and represents the highest category of membership. This distinction comes at varying points in a person’s career and is given for diverse activities that include research, teaching, administration, public service, practice, and notable participation in the Society.

The Academy for Gerontology in Higher Education
Tamar Shovali, PhD, FAGHE, Eckerd College

Behavioral and Social Sciences
Liat Ayalon, PhD, FGSA, Bar Ilan University; Jacqueline J. Benson, PhD, FGSA, Washington University in St. Louis; David Burns, PhD, FGSA, University of Texas Medical Branch; Brian Downer, PhD, FGSA, University of Utah; Tracey Gendron, PhD, FGSA, University of Virginia; Liz Grimes, PhD, FGSA, University of Nevada, Reno; Robert Hare, PhD, FGSA, University of California, San Diego; Tammy English, PhD, FGSA, University of Utah; Katarina Friberg-Felsted, PhD, MS, FAGHE, FGSA, University of Utah; Tracey Gendron, PhD, FGSA, Virginia Commonwealth University; Gizem Hülür, PhD, FGSA, University of Bonn, Germany; Kristen Jacklin, PhD, FGSA, University of Minnesota Medical School; Da Jiang, PhD, FGSA, The Education University of Hong Kong; Jessica L. Krok-Schoen, PhD, MA, FGSA, The Ohio State University College of Medicine; Jeong Eun Lee, PhD, FGSA, Iowa State University; Chien-Ching Li, PhD, FGSA, Rush University; Tracy Lynn Mitzner, PhD, FGSA Person In Design; Elizabeth Muñoz, PhD, FGSA, University of Texas at Austin; Natalie G. Regier, PhD, FGSA, Johns Hopkins School of Nursing; Oscar Ribeiro, PhD, FGSA, University of Aveiro, Portugal; Cathy B. Scott, PhD, MSW, FGSA, University of Tennessee Chattanooga; Juliette M. Shellman, PhD, RN, FGSA, University of Connecticut School of Nursing; Angelina R. Sutin, PhD, FGSA, Florida State University; Ranak Trivedi, PhD, FGSA, Stanford University/VA Palo Alto; Lindsay R. Wilkinson, PhD, FGSA, University of Nebraska at Omaha; Kathy D. Wright, PhD, RN, FAAN, FNAP, FGSA, The Ohio State University, College of Nursing

Biological Sciences
Laura Haynes, PhD, FGSA, University of Connecticut School of Medicine; Daniel Promislow, PhD, FGSA, Tufts University; George Sutphin, PhD, FGSA, University of Arizona; Harriom Yadav, PhD, FGSA, University of South Florida

Health Sciences
Jane Chung, PhD, RN, FGSA, Virginia Commonwealth University; Mark A. Espeland, PhD, FGSA, Wake Forest University School of Medicine; Sara Elyse Espinoza, MD, MSc, FGSA, Cedars-Sinai Medical Center; Manuel E. Hernandez, BS, MS, PhD, FGSA, University of Illinois Urbana-Champaign; Megan Huisingsh-Scheetz, MD, MPH, AGSF, FGSA, University of Chicago; Lori L. Popejoy, PhD, RN, FAAN, FGSA, University of Missouri; Juleen Rodakowski, OTD, MS, OTR/L, FAOTA, FGSA, University of Pittsburgh; Andrea Rosso, PhD, MPH, FGSA, University of Pittsburgh; Tina R. Sadarangani, PhD, RN, ANP-BC, GNP-BC, FGSA, New York University; Lenora Smith, PhD, FNP-BC, FGSA, University of Alabama in Huntsville College of Nursing; Anna Zisberg, PhD, RN, FAAN, FGSA, University of Haifa

Social Research, Policy, and Practice
Sato Ashida, PhD, FGSA, University of Iowa; Clara Berridge, PhD, MSW, FGSA, University of Washington; Alexis Coulourides Kogan, PhD, MSG, FGSA, University of Southern California; Jennifer Crittenden, PhD, MSW, FGSA, University of Maine; Marguerite Deiema, PhD, FGSA, University of Minnesota; Zach D. Gassoumis, PhD, FGSA, University of Southern California; Gilbert Gim, PhD, FGSA, George Mason University; Megumi Inoue, PhD, MSW, RN, FGSA, George Mason University; Janice M. Keefe, PhD, FGSA, Mount Saint Vincent University; Ulla Kriegermeier, PhD, FGSA, University of Graz; Michael J. Lepore, PhD, FGSA, University of Massachusetts Amherst; Brian W. Lindberg, MSW, FGSA, Healthspieren, LLC; Rahul Malhotra MBBS, MD, MPH, FGSA, Duke-NUS Medical School; Tara L. McCullen, PhD, MPH, FGSA, United States Department of Veteran Affairs; Mary Helen McSweeney-Feld, PhD, FGSA, Towson University; Kelly A. Melekis, PhD, MSW, FGSA, University of Vermont; Tonya J. Roberts PhD, RN, FGSA, University of Wisconsin-Madison; Abby J. Schwartz, MGS, MSW, PhD, FGSA, East Carolina University; Erica Solway, PhD, MSW, MPH, FGSA, University of Michigan; Cara L. Wallace, PhD, LMSW, APHSW-C, FGSA, Saint Louis University; Joyce Weil, PhD, FGSA, Towson University

To learn more about the nomination process and see a listing of all fellows, visit www.geron.org/membership/fellows.
**HHS Delivers Strategic Framework for National Plan on Aging**

The U.S. Department of Health and Human Services (HHS), through its Administration for Community Living, has released “Aging in the United States: A Strategic Framework for a National Plan on Aging.” The report lays the groundwork for a coordinated effort - across the private and public sectors and in partnership with older adults, family caregivers, the aging services network, and other stakeholders - to create a national set of recommendations for advancing healthy aging and age-friendly communities that value and truly include older adults. The national plan on aging will advance best practices for service delivery, support development and strengthening of partnerships within and across sectors, identify solutions for removing barriers to health and independence for older adults, and more. Developed by leaders and experts from 16 federal agencies and departments working together through the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities, the report also reflects input from community partners and leaders in the aging services network.

**Online Pain Resource Undergoes Major Update**

GeriatricPain.org is a one-stop website with free best-practice tools and resources that support recommendations for quality pain assessment and management in older adults. With funding from The Mayday Fund and the Bowers Dementia Education and Outreach Fund, this long-standing resource has recently undergone a major structural and content update to enhance user-friendliness and access to available tools. Contact GeriatricPain.org Editor Keela Herr, PhD, RN, AGSF, GSAF, FAAN at keela-herr@uiowa.edu for more information.

**Report Addresses Value of Inclusive Spaces in Built Environments**

The Foundation for Social Connection has released its fourth SOCIAL Framework Report — The Built Environment Sector — for public comment. The report highlights the critical role of well-designed, intentional, and inclusive spaces in addressing social isolation, loneliness, and connection.

Within this report, readers will find a deep dive into evidence-based and promising interventions related to the intersection of transportation, housing, and our environment. Additionally, it presents untapped policy opportunities, important considerations, and research gaps to further explore. The report encourages leaders from all levels of influence to explore their role in reimagining the environments where people live, play, and grow and help empower communities to thrive together.

**MedPAC and MACPAC Issue Data on Dual-Eligibles**

The Medicare Payment Advisory Commission (MedPAC) and the Medicaid and CHIP Payment and Access Commission (MACPAC) have released a newly updated data book: “Beneficiaries Dually Eligible for Medicare and Medicaid.” This edition describes the dual-eligible population’s composition, service use, and spending in calendar year 2021. New this year are data that includes the overlap in Medicaid and Medicare managed care enrollment.

Dual-eligible beneficiaries receive both Medicare and Medicaid benefits by virtue of age or disability and low income. Key statistics in this year’s data book include:

- There were 12.8 million people who were dually eligible for Medicare and Medicaid for at least one month in 2021.
- People who are dually eligible for Medicare and Medicaid account for a disproportionate share of spending in both programs. Dual-eligible beneficiaries totaled 19 percent of the Medicare population in 2021 but accounted for 35 percent of Medicare spending. Similarly, dual-eligible beneficiaries accounted for 13 percent of all Medicaid beneficiaries but 27 percent of Medicaid spending.
- Reflecting the continued shift from fee-for-service (FFS) to managed care in Medicare and Medicaid, less than half of dual-eligible beneficiaries (42 percent) were enrolled only in Medicare FFS in 2021, 46 percent were in managed care only, and 13 percent spent part of the year in FFS and part of the year in managed care. For Medicaid services, 42 percent of dual-eligible beneficiaries had at least one month of comprehensive managed care enrollment.
- One-quarter (25 percent) of all dual-eligible beneficiaries had at least one month in which they were simultaneously enrolled in a Medicare managed care plan and a comprehensive Medicaid managed care plan. Another 48 percent of all dual-eligible beneficiaries had some enrollment in Medicare managed care and/or comprehensive Medicaid managed care but not simultaneously.

**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. The report is also now available in Spanish.
New Campaign Looks to Safeguard High-Risk Individuals from Severe COVID-19

Roughly three in four adults in the U.S. have at least one risk factor that places them at high risk for progression to severe COVID-19. Many are not aware that they may be at high risk. GSA, along with other health care and patient organizations on the COVID-19 Multi-Stakeholder Advisory Board, collaborated with Pfizer to help address the need for continued education, communication, and action to support individuals who are at high risk of severe COVID-19.

Among our goals is for individuals and healthcare professionals to:
- Talk about the risk of COVID-19 for those at high risk of severe illness
- Have a personalized discussion and plan
- Leverage technologies and tools to facilitate communication and quality care

Among the goals is for U.S. national and state health authorities to:
- Provide clear guidance on the latest COVID-19 protocols
- Continue to support testing and treatments for appropriate patients
- Ensure adequate funding for COVID-19 services

To learn more about this effort and how you can take action, read “COVID-19 Commitment: A Plan to Support High-Risk People” on KnowPlanGo.com.

Unique New Online Directory Offers Solutions for Dementia Caregivers

Best Programs for Caregiving (BPC) is a first-of-its-kind free online directory of top-rated programs that support family and friend caregivers of individuals living with dementia. BPC provides detailed information on nearly 50 dementia caregiving programs across the U.S. that have demonstrated results in helping caregivers access resources, improve their hands-on skills, reduce stress and enhance their physical and mental well-being. It’s a robust, easy-to-use database that serves both dementia caregivers and service providers alike.

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 and 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.

GSA enrich: online anytime

GSA Enrich — the Society’s online learning center for resources — offers cutting-edge toolkits, engaging webinars, and thought-provoking podcasts. It’s your passport to staying ahead in the ever-evolving field of aging studies.

Here are some new offerings available on our platform:

Webinars
- An Introduction to Transparency in Learning and Teaching (TILT) Methods
- Careers in Aging Panel: Research Careers (Careers in Aging Series)
- Discussing the Special Issue of The Gerontologist on Implementation Science in Gerontology

Grant Chats
- Addressing Diversity, Equity, Inclusion & Belonging (DEI&B) in Grant Writing
- Developing a Research Trajectory
- Funding Your Research: AHRQ and PCORI
- No Researcher Is an Island: Developing Your Research Team

Career Conversations
- Making the Most Out of Your Post-Doc
- Negotiating Your First Academic Job Offer
- Surviving and Thriving: Succeeding in Your First Academic Position

Job Searching and Networking for Early Career Investigators in Interdisciplinary Research of Aging

Promoting Diversity, Equity, and Inclusion in The Journals of Gerontology Series A: Peer Review and Publication Practices for the Medical Sciences Section (Manuscript Writing and Reviewer Skills Program Webinar Series)
Nurses’ Preparation and Roles in the Field of Gerontology
By Harleah G. Buck PhD, RN, FPCN, FAHA, FGSA, FAAN, University of Iowa; Rebecca Lorenz PhD, RN, The Ohio State University; Marcia Shade PhD, RN, University of Nebraska Medical Center; Darina V. Petrovsky PhD, RN, Duke University; and Justine S. Sefcik PhD, RN, Drexel University

Nurses comprise much of the U.S. healthcare workforce, and all nurses are prepared for practice, education, and research. The three areas come together in evidence-based practice (EBP) for older adults. Practice-based Registered Nurses (RNs) are consumers of research. Advanced practice nurses (masters or DNP) translate and implement research, and PhD-prepared nurse scientists conduct research to shape the field of gerontology. Yet, many people working in gerontology are unaware of the educational preparation and the different paths nurses may take to specialize in caring for older adults. This piece aims to demystify the pathways nurses passionate about improving care delivery and quality of life for older adults can take to advance care, science, and their careers.

While there are multiple entry points to nursing (i.e., first or second career, post-high school, or post-baccalaureate), all registered nursing education is driven by the National Council of State Boards of Nursing’s (NCSBN) National Council Licensure Examination called the NCLEX. NCSBN brings together nurse leaders and regulatory boards to ensure safe and competent care is provided through regulation, practice, and education. After completing the NCLEX, RNs can obtain board certification in gerontology with a minimum of 2,000 hours of clinical practice caring for older adults, 30 hours of gerontological continuing education, and successfully passing an examination. There are also other opportunities for RNs to obtain additional certification in other areas. From there, RNs may also choose to advance their education at the master’s (MS, MSN, MN) and/or doctoral level as a Doctor of Philosophy (PhD) or Doctor of Nursing Practice (DNP).

Advanced practice nurses (masters or DNP) are board-certified as either adult-gerontology acute care, primary care, or clinical nurse specialists based on their education from an accredited program, supervised clinical hours (500+ hours), and have successfully passed an examination. The National Organization of Nurse Practitioner Faculty (NONPF) issues and regularly updates the core competencies required for advanced practice nurses. A DNP is a nurse with the highest level of practice education who can develop and lead EBP quality improvement projects, lead national organizations, or teach in clinical nursing programs. Their role is vital to translating and implementing research to improve patient outcomes and healthcare quality in older adults. Institutional requirements vary from program to program but consist of advanced coursework, exams, practicum, and final scholarly quality improvement project or practicum.

Nurse educators (MS, DNP, or PhD) scaffold all this educational preparation. Nurse educators share general similarities with other gerontological educators using holistic, humanistic models to present, describe, and explain aging and older adults. Where nurse educators diverge is with an emphasis on pathophysiology and pharmacology. Nurse educators are practice and pedagogical experts who use didactics, simulations, and clinical practicums to educate the next generation of nurses. The critical need to educate more nurses drives most of today’s pedagogy in gerontologic nursing.

Nurse scientists are PhD-prepared nurses who conduct research and serve primarily as faculty in schools and colleges of nursing, as well as in healthcare systems and industry. Nurse scientists focus on designing and carrying out studies that advance nursing knowledge, practice, and patient care. In keeping with their institution’s requirements, they have completed coursework, comprehensive exams, and a research-based dissertation. Gerontological nurse scientists’ research spans the translational spectrum from cell (bench scientists) to society (system level policy). They significantly advance EBP, improve the care of older adults with various health conditions, and shape healthcare policies and interventions.

In summary, nurses are the largest group of healthcare providers in the U.S. Nurses are prepared to care for the growing number of older adults. We have more than adequate knowledge, skill, and desire for this task. While there are multiple pathways for nurses, whichever path a nurse takes, the nursing workforce is prepared to continue to provide the highest quality care for older adults.

Continued from page 2 - Advocating for the Field, Amplifying Member Voices in Washington

NIA, a coalition of more than 50 organizations, which advocates for federal funding of National Institute on Aging-supported research. She also continues to serve as co-chair of the Adult Vaccine Access Coalition (AVAC) and served as moderator for a recent AVAC-led Capitol Hill briefing on vaccine infrastructure.

We have increased the capacity of our staff to lead on advocacy and policy issues, welcoming Jordan Miles as our new full-time director of policy. Jordan will work with Trish to advance GSA’s policy work. And as we shared last month, we have three great policy interns joining us this summer.

Many of our advocacy activities are tied to similar GSA initiatives in the practice change arena informed by members’ work. The new publication on obesity management as shown on the cover is a prime example. We’ll have more news to share in coming months, too — like the release of a new online version of GSA’s KAER Toolkit for Brain Health.

It’s a time of great momentum for GSA, and we are honored to be able to amplify the collective expertise of the GSA membership to inform the policy process in Washington, DC.
Showcase Your Scholarship!

We are accepting late breaking abstract submissions for posters and papers from July 19 - August 29, 2024!

This is your opportunity to present compelling research results that were not available during the general abstract submission period.

GSA2024.ORG

now open: applications for DAC U.S. healthcare system fellowship program
DAC Healthcare System Preparedness (DAC-SP) is seeking applications from U.S. healthcare systems interested in implementing and evaluating the Early Detection Blueprint for Cognitive Impairment as a clinical workflow improvement project. Up to 10 U.S. healthcare systems will be selected for the U.S. Healthcare System Fellowship Program for Early Detection of Cognitive Impairment based on their demonstrated readiness and capacity for implementing the blueprint. Applications are due Sunday, July 21.

AHRQ Welcomes Applications Related to Person-Centered Models of Care
The U.S. Agency for Healthcare Research and Quality (AHRQ) has released a special emphasis notice (SEN) to convey the agency's interest in supporting health services research to conduct research that will address questions related to the development, implementation, evaluation, and scale of person-centered models of care to optimize physical and mental health, functional status, and the well-being among older adults. It also supports AHRQ's ongoing commitment to the inclusion of priority populations in health services research. The agency encourages research teams to submit applications in response to this SEN using AHRQ's current research grant announcements.

NIA Will Support Research Examining U.S. Health Disadvantage
The National Institute on Aging (NIA) has published the Notice of Special Interest (NOSI) - U.S. Health in the International Perspective (NOT-AG-24-004). This notice is designed to stimulate applications for conducting research that examines mechanisms and causes behind the increasing U.S. health disadvantage, which refers to worsening life expectancies and health outcomes in the U.S. compared to other countries. Of particular interest are projects that examine cross-national and U.S. cross-regional or cross-state differences in policy context that may drive poor health outcomes.