Please join us for the first ESPO Pre-Conference Workshop!

Tools for Building a Solid Career in Gerontology

Wednesday, November 16th from 12:30-4:30PM!

This workshop is open to ESPO members (students and transitional members) of all disciplines and will be applicable to careers in both academic and non-academic settings.

Dr. Rebecca Allen will discuss the broad spectrum of skills needed to build a successful career in gerontology, including developing career goals in the academic and non-academic setting, managing one’s first job, mentorship, and work-life balance.

Dr. Melissa O’Connor will lead this session examining skills that will facilitate transitioning into diverse leadership roles, such as participating at the local, organizational/institutional, or national level, leading research teams, and becoming involved in aging policy.

Dr. Noah Webster will chair this session, focusing on topics such as finding funding opportunities, grant writing, writing for publication, and responding to reviewer comments for grants and manuscripts.

Dr. Rebecca Allen will discuss the broad spectrum of skills needed to build a successful career in gerontology, including developing career goals in the academic and non-academic setting, managing one’s first job, mentorship, and work-life balance.

Dr. Rebecca Allen will discuss the broad spectrum of skills needed to build a successful career in gerontology, including developing career goals in the academic and non-academic setting, managing one’s first job, mentorship, and work-life balance.

Dr. Rebecca Allen will discuss the broad spectrum of skills needed to build a successful career in gerontology, including developing career goals in the academic and non-academic setting, managing one’s first job, mentorship, and work-life balance.

GSA is offering a 50% discount to the first 20 individuals who e-mail meetings@geron.org. Once your e-mail request is received, you will be sent a special code to register at the discounted rate of $37.50. All registrants will also be entered for a chance to win $100 Marriott gift card onsite at the meeting!

COST: $75

For general questions, please email espo@geron.org.
What I Have Learned as a First Generation Scholar:
“As we are liberated from our own fear...”
Rebecca S. Allen, Ph.D., ABPP
“Tools for Building a Solid Career in Gerontology”
ESPO’s Inaugural Pre-Conference Workshop
DISCLOSURE

I have no relevant commercial relationships to disclose.
Objectives

“The principle goal of education is to create [individuals] who are capable of doing new things, not simply of repeating what other generations have done.” – Jean Piaget

1. Provide an overview of one career in academic gerontology, specifically clinical geropsychology...
2. How to construct career goals (academic and not)...
3. What you need to know to manage your first job...
4. Characteristics of positive and negative mentoring ...
5. Striving toward work-life balance...a mindful walk across your lifetime...
Elder’s Life-Course Perspective

The multiple developmental trajectories of individuals are basic elements of the life course.

♦ A life-course perspective emphasizes the ways in which a person’s…:
  ♦ Location in the social system
  ♦ Historical time period of life
  ♦ Linked lives
  ♦ Agency
♦ ...shape their experience.
A Little RSA History...

- A **First Generation** Scholar
  - Mom
  - Daddy
  - Siblings
- Appalachian and Greatest Generation influence
- Sheer klutz – but lots of endurance/grit...
- “Becky needs to learn how to play...”
- Do what you are good at = school
- Mentorship, and this is lifelong...
This led to certain RSA values...

- “As we are liberated from our own fear our presence actually liberates others.” – Marianne Williamson

- “You may not control all the events that happen to you, but you can decide not to be reduced by them.” – Maya Angelou

- “Pay it forward...” - Everyone
Skills Needed to Build a Successful Career in Gerontology

“Knowing what must be done does away with fear.” – Rosa Parks

1. An interest in adult development and aging.

2. A willingness to go where the training programs are.

3. Acquiring foundational competencies – interprofessional and interdisciplinary.

4. Acquiring functional competencies in your chosen field (EX).

5. Knowing what you do not know and openness to experience.
Objectives

“The principle goal of education is to create [individuals] who are capable of doing new things, not simply of repeating what other generations have done.” – Jean Piaget

1. Provide an overview of one career in academic gerontology, specifically clinical geropsychology...
2. How to construct career goals (academic and not)...
3. What you need to know to manage your first job...
4. Characteristics of positive and negative mentoring ...
5. Striving toward work-life balance...a mindful walk across your lifetime...
Developing Career Goals in an Academic Setting

Construct a Career Road Map, and Cultivate Psychological Flexibility!

- **Approach**
  - What kind of setting suits you, your interests, your skill set, and your lifestyle preferences?
    - Tier 1 Research Settings and Medical Schools?
    - Non-Tier 1 State Flagship Universities?
    - Liberal Arts Colleges?

- **Creation of a Safe Space**
  - Pacing for tenure (if applicable)
  - Post-tenure productivity (Full professor?)

- **Personal Growth and Self-Care**
  (you learn, and you learn, and you learn...)
Figure 1. The model of therapeutic effectiveness is comprised of 3 primary domains (domain A, personal growth and self-care; domain B, therapeutic approaches; and domain C, creation of a safe space) and 3 overlapping or hybrid domains (domain AB, therapeutic humility; domain BC, therapeutic pacing; and domain AC, therapeutic presence). Domain ABC indicates optimal therapeutic effectiveness (see Table 1).
Example Visual Career Roadmaps

CAREER ROAD MAP
IAN M. MCDONOUGH, OCTOBER 2016

PRIMARY TRAINING BACKGROUND
- Memory
- Normal Aging
- Neuroimaging

SECONDARY TRAINING BACKGROUND
- Intelligence (g)
- Preclinical Alzheimer's
- Intervention

TRAINING GOALS
- Racial Disparities
- MCI Assessments
- Socio-cultural determinants of stress
- Successful grant writing

COLLABORATORS
- Genetics
- Hormones
- Dementia

ACHIEVEMENT GOALS
- 2 submitted papers on racial disparities/brain
- 1 K-Award submission on racial disparities/brain to NIA or NIMH
- Submit RCMAR grant
- Establish collaborators

ROLES
- Give community talks
- Become journal editorial board member

ACHIEVEMENT GOALS
- Develop theoretical model
- Develop translational intervention idea
- Submit R01 NIH grant (NIA/NIMH)
- Obtain tenure

ROLES
- Enhance community involvement
- Become an NIH grant reviewer
- Become an associate editor

LONG-TERM GOALS
1. Understand how socio-cultural factors impact the brain that lead to racial disparities in dementia.
2. Develop translational interventions to increase the brain's resilience to minimize risk of dementia.
3. Become a well-rounded investigator that makes a major contributions to understanding and improving the lives of older adults.
Example Visual Career Roadmaps

NAME: SOLA AINA-POPOOLA
ASSIGNMENT 1-CAREER ROAD MAPP

SHORT TERM GOAL: 5 YEARS

1. Understand how socio-cultural factors impact the brain that lead to racial disparities in dementia.
2. Develop translational interventions to increase the brain’s resilience to minimize risk of dementia.
3. Become a well-rounded investigator that makes a major contributions to understanding and improving the lives of older adults.
Developing Career Goals in a Non-Academic Setting (still like a Roadmap)

Research Think Tanks and Industry (based on what I know...)

- More of an 8 to 5 job.

- Doing assigned research and producing:
  - Reports
  - Patents on scalable products
  - State of science briefs

- Chances for advancement; no tenure
Developing Career Goals in a Non-Academic Setting

Policy Settings (based on what I know...)

- Likely to work in a government setting or...
- For a professional agency (American Psychological Association) or advocacy group
- Produce:
  - Reports
  - Position statements
  - Briefs for congressional aids
Developing Career Goals in a Non-Academic Setting

Clinical Practice Settings

- Patients/clients, patients/clients, patients/clients and generation of revenue (read billing, billing, billing...)
- Potential for clinical mentorship of trainees
- Continuing education!
- Overhead and group practice settings
- Consultation and treatment networks
- Long-term care settings
- Veterans Affairs Medical Centers (some research heavy but mostly clinical)
- Board specialization becoming important across disciplines
Objectives

“The principle goal of education is to create [individuals] who are capable of doing new things, not simply of repeating what other generations have done.” – Jean Piaget

1. Provide an overview of one career in academic gerontology, specifically clinical geropsychology…
2. How to construct career goals (academic and not)…
3. What you need to know to manage your first job…
4. Characteristics of positive and negative mentoring …
5. Striving toward work-life balance…a mindful walk across your lifetime…
Managing One’s First Job

Capacity is the ability to do, experience, or understand something.

1. Setting matters! Know your best “fit” and be mindful of this on interviews. Remember you are interviewing THEM too.
   a. Academic town?
   b. City?
   c. Productivity and funding expectations?
   d. Geographic proximity to family (matters if you choose to have children)
2. Start up is nice but your raises will be based on your starting salary.
3. Balancing initiative and “go along to get along.”
4. Watch the service!
5. Advancement/tenure
6. Health benefits and retirement packages
Objectives

“The principle goal of education is to create [individuals] who are capable of doing new things, not simply of repeating what other generations have done.” – Jean Piaget

1. Provide an overview of one career in academic gerontology, specifically clinical geropsychology...
2. How to construct career goals (academic and not)...
3. What you need to know to manage your first job...
4. Characteristics of positive and negative mentoring ...
5. Striving toward work-life balance...a mindful walk across your lifetime...
Mentorship Definition

Zerzan et al. (2009) p. 140

“A symbiotic relationship aimed at advancing careers and career satisfaction for both the mentor and the mentee...

- Dynamic
- Collaborative
- Reciprocal

...focused on the mentee’s personal and professional development.”

Recommend seeking mentors who are:

- Both inside and outside one’s own work environment
- At proximal and distal career stages in comparison with one’s own development
National Mentorship Resource

National Research Mentoring Network (NRMN)
https://nrmnet.net/about-nrmn-2/

- A nationwide consortium of biomedical professionals and institutions collaborating to provide all trainees...with evidence-based mentorship and professional development programming.
- Utilizes structured mentorship and networking experiences to enhance the training and career development of individuals from diverse backgrounds, communities, and cultures who are pursuing biomedical and behavioral research careers.
- Links knowledgeable and skilled mentors from various disciplines with talented, motivated and diverse mentees from the undergraduate to early career faculty.
- Employs and disseminates innovative best practices for mentorship training, unique opportunities for networking and professional development intended to facilitate the attainment of hallmarks of successful research career progression for mentees at each career stage.
Mentorship Competency
Fleming et al. (2013)

“Our chief want in life is somebody who will make us do what we can.” – Ralph Waldo Emerson

- Development and psychometric properties of a 26-item mentorship skills inventory (https://www.surveymonkey.com/r/Mentor_Self_Reflec)
  - Maintaining effective communication (6 items)
  - Aligning expectations (5 items)
  - Assessing understanding (2 items)
  - Addressing diversity (2 items)
  - Fostering independence (5 items)
  - Promoting professional development (5 items)
Mentorship Malpractice
Chopra, Edelson & Saint (2016) JAMA

“In order to be a mentor, and an effective one, one must care. You must care.” – Maya Angelou

Definition:
- “mentor behavior that puts a mentee’s academic career at risk”

Active and Passive Dimensions
“In order to be a mentor, and an effective one, one must care. You must care.” – Maya Angelou

- “The Hijacker”:
  - Take mentees’ ideas and claim as own
  - Stockholm syndrome in mentees (trickle-down glory)

- “The Exploiter”:
  - Mentees saddled with low-yield activities

- “The Possessor”:
  - Passive-aggressive approach to collaboration
  - Disparaging co-mentors or demeaning mentee for reaching out to others
Passive Mentorship Malpractice
Chopra, Edelson & Saint (2016) JAMA

“In order to be a mentor, and an effective one, one must care. You must care.” – Maya Angelou

- “The Bottleneck”:
  - Internal focus diminishes mentee productivity
- “The Country Clubber”:
  - Mentor wants to be everybody’s friend
  - Avoid difficult conversations with others on behalf of mentees
- “The World Traveler”:
  - Lack of FTF time and direction
  - Literally busy people
Avoiding Mentorship Malpractice
Chopra, Edelson & Saint (2016) JAMA

“In order to be a mentor, and an effective one, one must care. You must care.” – Maya Angelou

1. Don’t be complicit.

2. Set boundaries and communicate needs.

3. Establish a mentorship team.

4. Know when to walk away.
Objectives

“The principle goal of education is to create [individuals] who are capable of doing new things, not simply of repeating what other generations have done.” – Jean Piaget

1. Provide an overview of one career in academic gerontology, specifically clinical geropsychology...
2. How to construct career goals (academic and not)...
3. What you need to know to manage your first job...
4. Characteristics of positive and negative mentoring ...
5. Striving toward work-life balance...a mindful walk across your lifetime...
Work-Life Balance

“Don’t confuse having a career with having a life.” – Hillary Clinton
“Balance is not better time management, but better boundary management. Balance means making choices and enjoying those choices.” – Betsy Jacobson

- Proper prioritizing, varies over time, rewarding and realistic
  - Build downtime into your schedule
  - Drop activities that can sap your time or energy
  - Rethink your errands
  - Get moving
  - Remember that a little relaxation goes a long way
Work-Life Balance Examples

1. Graduate school is a perfectly fine time to have a child *if* you have a supportive spouse and the financial and health benefit means to accomplish this.

2. Not the best idea to interview at a time of career transition under certain circumstances.

3. Pre-tenure again is a perfectly fine time to have a child *and* know the maternity/paternity leave policies of your place of employment.

4. Elder care as a work-life issue across different stages.
It always seems impossible... Until it is done.

“"I am only one; but still I am one. I cannot do everything, but still I can do something. I will not refuse to do something I can do.”
- Helen Keller
THANK YOU!

...now pay it forward...
Research and Scholarship

Noah J. Webster, University of Michigan
ESPO Pre-Conference Workshop:
Tools for Building a Solid Career in Gerontology (11/16/16)
I have no relevant commercial relationships to disclose.
Topics / Outline

• Themes

• Info about Me for Context / Bias
  • Involvement with ESPO and GSA
  • Roles on Publications Committee

• GSA Meeting Suggestions

• Grants & Publications
Themes (to keep in mind)

1) Openness

Be open to....
- new ideas
- perspectives
- opportunities

You never know....
- what it will lead to (job, paper, collaboration)
  OR
- when it will be useful

Good to have focus, but also good to explore!
Themes
(to keep in mind)

2) Always Learning

• We never stop being mentees
• Also, never too early to mentor
• Not mutually exclusive / there’s overlap

That said….your input is welcome!!
My Background

• Assistant Research Scientist (2014-)
  @ University of Michigan

• Post-doc at University of Michigan (2011-14)

• Graduate school at Case Western Reserve University (2001-2011)

• Ph.D. in Sociology
  • Medical Sociology

• Sociology of Aging and Life Course
My Background

Research Areas

• Social Relationships and Health

• Influence of environmental context on social relationships and health

• Links between social networks and... health-related behaviors env. sustainability-related behavior

*Acknowledgement
Have had great mentors & Can’t have too many
My Disclosures

Grants – I have

• Submitted grants (NIH, Foundations, within University)

• Resubmitted grants

• Been awarded grants (internal within univ)

• Submitted many more grants than awarded

• Had grants not discussed

• Some discussed then score got worse
My Disclosures

Articles – I have

• Submitted manuscripts for publication

• Revised and resubmitted articles…and again

• Had articles rejected

  Who hasn’t? Probably nobody

• Had articles accepted
My Disclosures

Reviewing – I have

• Reviewed articles for journals as
  • novice reviewer (e.g., TG)
  • reviewer in training
  • regular reviewer

• Reviewed - Internal grant applications

• Reviewed colleagues articles and grants
Digression...but relevant tips

- At early stage, never turn down request to review

- Editors can be your friends & it’s great experience!
  e.g., may need to ask for extension on R&R

- Sharpens your own writing
  - Critical thinking
  - Learn and reinforce dos and don’ts
Digression… but relevant tips

Seek out opportunities to be reviewer

- Don’t wait to be invited
- Good for CV

• Formal
  - TG Novice reviewer
  - Other – reviewer in training

• Informal
  - Ask mentors if can help with review

  Note: they are confidential though
  - Review colleagues’ draft articles and grants
  - Reciprocity – may in turn review yours
  - Join/Start clubs on campus/GSA to do this
Your Turn

How many of you have submitted a...

Grant proposal before?
- NIH
- NIH Resubmission
- Other (NSF, etc.)
- Foundation
- Internal (to your university)

Article for publication?
- Revise and Resubmit

Reviewed an article?
My pathway to Gerontology and GSA

Undergraduate work ➔

➔ Internship (Public Health – Infants)

➔ Graduate School – Medical Sociology

➔ Res. Assistantships with Gerontologists

➔ GSA annual meeting (2001)

➔ Early Stage Career in Aging (2011-present)

Theme: Be open to new ideas & opportunities!
Your Turn

How many of you are

Undergraduate Students?

Graduate Students?

Post-Docs?

Early Career Faculty?

How many attending GSA for first time?

BS members? HS, BSS, SRPP?

Interested in interdisciplinary research?
My pathway to ESPO roles

• Volunteered for ESPO leadership role in 2010
• ESPO Rep to publications committee (2010-12)
• ESPO Rep to membership committee (2012-14)
• Transitioned ESPO to regular member (2015)
  Missed ESPO / Wanted still to be involved
• GSA-wide calls for volunteers (2015) – applied
  • Be careful what you wish for
  • Appointed Chair of Publications Committee
Your Turn

**How many of you....**

- Have attended an ESPO event? (beyond this)
- Are ESPO volunteer leaders?
- Thinking about applying?

If not, what are you waiting for!
2 Relevant Events Here at GSA

Title: How to Publish: Editor's Confidential

Day: Thursday
Time: 8-9:30
Location: Sheraton Grand Ballroom C (5th Floor)

• Great information on how to publish from editors’ perspectives
• Roundtable discussion
• IAGG proposing something similar

Note: conflicts partly with ESPO community breakfast
2 Relevant Events Here at GSA

Title: A New Lens on the National Institutes of Health-Funding Opportunities for Early-Career Scientists

Day: Friday
Time: 2:30 - 4:00p.m.
Location: Grand Ballroom A (Sheraton)

• Highlight NIA and NIH grants process
• Feature NIA Director Richard Hodes and leadership of all NIA program divisions
• Focus on needs of new and early-stage investigators
• Speed-networking activity
Meeting Suggestions

Maybe for next year (or tonight)….Do you homework to identify….

- talks / events to attend

- people to meet with
  - email ahead of time to setup
Meeting Suggestions

• Go to session outside of your track

• Don’t miss opportunity to tell someone new what you are interested in
  • They’re interested – that’s why they are here

• Set Goal: Meet one new person here a day

• Ask mentors to introduce you (it’s their job)
Society and Other Awards

• When in doubt - always apply!

• If you don’t apply - for sure won’t win & somebody else will
  - true for grants and papers as well

• Be your own best advocate!
  - Ask mentor to nominate you for awards
  - Reciprocate – nominate them too
Grant Writing
Grant Writing

How to Find Funding Opportunities?

• Google (like everything else)

• Grants.gov (NIH, CDC, NSF, etc.)

• University databases
  - Talk to development staff at univ.
  - Foundation ideas

• Talk to mentors, colleagues

• Get on listservs
Grant Writing

How to find funding opportunities?

• Seek out internal awards if available
  - Good for pilot studies
  - Career development
  - Expand your network on campus

• If at small institution – use GSA as your home to learn about opportunities

• Apply/attend for national trainings, e.g.,
  - NIA Butler-Williams
  - RAND Summer Institute on Aging
Grant Writing

Grants

Average age for PhDs for first NIH RO1 = 42

Adages relevant to grant writing

If at first you don’t succeed….try, try, try and try again

Practice makes perfect (? Or maybe at least better)

It’s not a sprint…it’s a marathon
Grant Writing Basics

1. Science – Drives Everything
2. Funding - Pragmatics
3. Pragmatics – Writing and Revising
4. Ask for Help
The Basics:
National Institutes of Health (NIH)

- Types of Grant Programs
- Application Guide / Instructions
- Standard Due Dates
- Study Sections
The Basics:
NIH Types of Grant Programs

• **RO3 (Small Grant Program)**
  
  – Provides limited funding for a short period of time (2 years maximum)
  
  – Supports variety of projects: pilot studies, collection of preliminary data, secondary data analysis.
  
  – Direct costs generally up to $50,000 per year
  
  – Not renewable
The Basics:

NIH Types of Grant Programs

• **R21 (Exploratory/Developmental Research Grant Award)**
  
  – Encourages new, exploratory, and developmental research projects
  
  – Limited to up to two years of funding
  
  – Combined budget for direct costs for the two year project period usually may not exceed $275,000.
The Basics:
NIH Types of Grant Programs

• **K99/00 (Pathway to Independence (PI) Award)**
  – up to five years of support consisting of two phases
    • 1-2 years mentored support for postdocs
    • 3 years of independent support

  – Awardees expected to compete successfully for independent R01 support during transition period
## The Basics: NIH Standard Due Dates

### New Applications

<table>
<thead>
<tr>
<th></th>
<th>Cycle 1</th>
<th>Cycle 2</th>
<th>Cycle 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>RO3</td>
<td>February 16</td>
<td>June 16</td>
<td>October 16</td>
</tr>
<tr>
<td>R21</td>
<td>February 16</td>
<td>June 16</td>
<td>October 16</td>
</tr>
<tr>
<td>K99/00</td>
<td>February 12</td>
<td>June 12</td>
<td>October 12</td>
</tr>
</tbody>
</table>

### Renewal, Resubmission, Revision

<table>
<thead>
<tr>
<th></th>
<th>Cycle 1</th>
<th>Cycle 2</th>
<th>Cycle 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>RO3</td>
<td>March 16</td>
<td>July 16</td>
<td>November 16</td>
</tr>
<tr>
<td>R21</td>
<td>March 16</td>
<td>July 16</td>
<td>November 16</td>
</tr>
<tr>
<td>K99/00</td>
<td>March 12</td>
<td>July 12</td>
<td>November 12</td>
</tr>
</tbody>
</table>
The Basics:
NIH Application Guide / Instructions

1. Specific Aims (one page)
   - present goals/objective of proposed research
   - summarize expected outcome(s)
   - Include impact that the results will exert on the research field(s) involved

2. Research Strategy (limited to 6/12 pages)
   Sub-Sections: Significance, Innovation, Approach

FOR RESUBMISSIONS ONLY:

3. Introduction to Application - (limited to one page)
The Basics: NIH – Study Sections


- **EXAMPLE 1:** Social Psychology, Personality and Interpersonal Processes Study Section
  review applications for research on:
  fundamental psychological and social conditions and processes, including personality, emotions, motivation, social identities and roles, social cognition, attitudes and attitude change, individual differences, aging and the life course, interpersonal relationships, small group dynamics, and their relation to mental and physical health.
The Grant Writing Experience

Can and should be a....

• Proactive
• Interactive
• Reactive
How to be Proactive

• Do your homework

• Re(read) RFAs, information on website

• Take note of deadlines

• Take note of contact people / program officers

• Contact them – begin with an e-mail; arrange a meeting by phone, at a conference, when you are in DC, etc. -- but know the lines not to cross
How to be Interactive

• Get recognition that things got where they were supposed to

• Make sure goes to appropriate study section (can suggest in cover letter)

• You can make inquiries – but only about structural/organizational things

• REMEMBER: DO NOT BE CONFRONTATIONAL
How to be Reactive / Reviews

• Develop a Strategy

• Take time / do your homework/ read and re-read the summary sheets

• Assume the reviewers are right if at all possible; if not find a way to non-confrontationally communicate the contrary facts

• Revise the strategy as necessary

• Prepare next steps; more pilot data? More analyses? More sample information?
Develop a Strategy to Revise

• If you are scored:
  Celebrate your good fortune

• If you are not scored:
  – Think carefully to decide next steps
  – Is the application redeemable?
    – Or are there fatal flaws
  – Remember: All is not necessarily lost.

• Ask your colleagues/co-investigators for input
  – Science works best when we work as teams
Reviewers are never/sometimes/always Right

- Sometimes it’s obvious - you screwed up
- Sometimes it is simply a matter of differences of opinion
- Sometimes it’s obvious - they screwed up

*Generally good to assume they are right*
Imagine you are writing a grant proposal

1) Take a minute…write down your first specific aim
   Examine, Investigate….etc.

2) Share your aim with a neighbor

3) Neighbors – ask questions, clarify refine, etc.

4) Revise aim

5) Volunteers to share? During Roundtable session?
THE PRAGMATICS OF WRITING A PROPOSAL

INITIAL PLANNING
THE PRAGMATICS OF WRITING A PROPOSAL
INITIAL PLANNING

• Give yourself at least 4-5 months to write a grant proposal – fool yourself re submission date

• Read the instructions; strictly follow them.

• Meet with your grant admin people very early in the process.

• Learn about budgets, budget justifications, required supporting materials
THE PRAGMATICS OF WRITING A PROPOSAL
INITIAL PLANNING

- Decide substantive area and type of grant (e.g., R03)
- Update literature review; retrieval/citation strategy
- Learn Proposal Format; Content; Practice Writing
- Discuss with your advisor / mentor
- Recruit reviewers to read before you submit:
  - experts in the field;
  - in statistics/methods;
  - style, English, grammar, etc.
NIH PROPOSAL FORMAT
SPECIFIC AIMS (1 Page)

Should have essential information to summarize the proposal.

1. Opening paragraph, current state of the knowledge and summary of gaps

2. Innovation of proposed research and how it fills some gaps

3. List objectives e.g., test hypotheses, create a novel design, solve a specific problem, challenge an existing paradigm, address barrier in the field, or develop new technology.

4. Finish with summary of the potential broad impact of the proposed research will have.
TIPS

• Each statement / paragraph should seamlessly lead to the next statement and they should logically be related

• Should stand on its own as a description of the entire project

• Spending time to develop is "time well spent"

• Will set mood of reviewer for rest of their reading
Many ways similar to grants

Should be experience that is:

• Proactive
• Interactive
• Reactive
Before You Submit Article

• Re-read EVERYTHING carefully

• Read recent relevant articles from the same journal. Make sure yours fits

• Make sure all your co-authors read

• Ask colleague to read it

• Never send anything Friday afternoon
How to be Interactive

• No acknowledgement of receipt of manuscript? E-mail an inquiry.

• Several weeks past the published response time? E-mail an inquiry.

• REMEMBER: DO NOT BE CONFRONTATIONAL
Responding to Article Reviews

- Re-read EVERYTHING carefully
- Read recent relevant articles from the same journal. Make sure yours fits
- Redo analyses if appropriate
- Revise manuscript & write letter to editor at same time
- Make sure letter is detailed
- Never send anything Friday afternoon
Thank you

E-mail: njwebs@umich.edu
NEW LENS ON AGING
Changing Attitudes, Expanding Possibilities

GSA 2016 ANNUAL SCIENTIFIC MEETING
NOVEMBER 16-20 | NEW ORLEANS, LA

Networking Toolkit: Complete with Set of Wings

Marilyn R. Gugliucci, MA, Ph.D., AGHEF, GSAF, AGSF
Professor & Director, Geriatrics Education and Research
University of New England College of Osteopathic Medicine, Maine

Gerontological Society of America, Former Chair Health Sciences Section
Association for Gerontology/Geriatrics in Higher Education, Former-President
Maine Gerontological Society, Former-President
ESPO Pre-Conference

This Continuing Education activity is jointly provided by The Annenberg Center for Health Sciences at Eisenhower and The Gerontological Society of America.
I have no relevant commercial relationships to disclose...
...but I sure wish I did!
GOAL: To know and understand what you probably already know and understand!

- Stretch your mind
- Have fun!
I. Core Definitions
Network/ing

• **Network**: group or system of interconnected people or things.

• **Networking**: A process that fosters the exchange of information and ideas...the cultivation of productive relationships.
  
  • Proactive approach to meeting people – to learn – with the hopes of helping them –
  
  • **NOT** to pitch your idea or your wares
Introvert/Extrovert

Do you consider yourself to be an:

• **Introvert:**
  • Charge your cell (regain energy) by being alone and quiet

• **Extrovert:**
  • Charge your cell (regain energy) by being with others

• **Why is this important to know?**
II. Find Good Mentors
Mentors

• Establish at least 5 mentors at any one time:
  • Personal Mentors
  • Professional Mentors
  • Life Mentors

• And let them know it!

Options: Self Approach; Networking; Introduction
Mentor Qualities

• Someone who:
  • you respect.
  • you think will respect you.
  • has experience.
  • has enthusiasm.
  • has no vested interests in your decisions.
  • is a good listener.
  • helps examine difficult choices.
Mentor(s) Guidance for Networking

• Try out ideas
• Ask for suggestions
• Role play
• Discuss next steps
• Advice if network has a short circuit
• Share your successes

**TIP:** Never pose a problem *without* offering at least 1 solution
III. Networking Keys

Starts with your Thumbs
5 Reasons to Network –

• More business
• Land a job - 76% get a job through networking
• To learn something (where to go, what to do...)
• Social reasons – to meet people with common ground
• To solve a problem
Types of Networking

• **Serendipitous** – in your travels, at a conference, etc.
  • Works where ever you are!

• **Strategic** – on purpose with purpose – know what it is you are after
  • Works in person or from afar...
Networking from Afar

• Goal: Make your name familiar to them in a positive way
• Think long-term, and strive to engage in some small way every few weeks over a 6-12 month timeline.
• When the moment is right hopefully you will have the opportunity to meet them in person
Find PEEC...

• Profession
  • who you are, what you do and with whom – perhaps what you are after

• Expertise
  • depth of knowledge as it relates to your profession or would be profession – rattle this off in 3s

• Environment
  • where is it you want to get involved

• Call to Action
  • what is it that you are after?
Create a PEEC Statement

• Once you are happy with it

• In one minute (pen to paper) list all the names of people that you think can assist you attain your PEEC statement
Networking: Keys to Keep in Mind

- Know yourself first
- Find a commonality
- Use the personal touch
- It is about the connection!
IV. Communication Keys
What is the MOST Powerful 3-Letter Word

ASK!!

In the English Language???
Asking Questions Exercise

• Pick a partner

• Set up so one person is facing the screen the other person is facing away from the screen

• The person facing away from the screen should have a piece of paper and pen/pencil

• A picture will be projected onto the screen, it will be a combination of geometric shapes (circles, squares, rectangles, triangles)

• **Part A** - the person with the paper can *only* ask yes and no questions and must try to recreate the image that is projected on the screen with the answers they receive from their partner - NO CONVERSATIONAL TALK
Communication

- Body Language: 55%
- Voice Tone: 38%
- Words: 7%

Mehrabian (1972 & 1981)
## Non-verbal Communication

| ☺ Posture ❗ Posture | ☺ Facial expressions ❗ Facial expressions |
| ▀ Appearance ❗ Appearance | ▀ Type of touch ❗ Type of touch |
| ▀ Body Movements ❗ Body Movements | ▀ “Air” of Confidence ❗ “Air” of Confidence |
| ☺ Hair style ❗ Hair style | ▀ Body position ❗ Body position |
| ☺ Clothing ❗ Clothing | ▀ Breathing ❗ Breathing |
| ☺ Eye contact ❗ Eye contact | ▀ Voice tone ❗ Voice tone |
| ☺ Standing position ❗ Standing position | ▀ Proximity to others ❗ Proximity to others |

The face, eyes, body, clothing, gestures, and touch speak volumes to others about your **beliefs, attitudes, and values**

**In Return....**

2. **Listen, look and observe** to determine what is being said.
• Getting ahead is as much about connections as it is about brains –
• maybe even more so…

Oh, grow up.

Be Right... Do Right???
The most common type of medication error that was detected in a large segment of the U.S. older adult patient population during 1989-90 was which of the following?

A. Activities of Daily Living
B. Instrumental Activities of Daily Living
C. Telemedicine
D. Geriatrician
E. Sitting out in the sun too long
疗程错误的最共同的类型在美国年长患者人数大幅被查出在1989-90期间是哪些以下？

A. 不正当药量
B. 复制类药物供应
C. 药物药物互作用的增加的风险
D. 药物疾病互作用的增加的风险
E. 增加的药物节食互作用
The most common type of medication error that was detected in a large segment of the U.S. older adult patient population during 1989-90 was which of the following?

A. improper dosing  
B. duplicate-class drug provision  
C. increased risk of drug-drug interaction  
D. increased risk of drug-disease interaction  
E. increased risk of drug-diet interaction  

• The Answer is: C
Tapping into What is Important...

- What do you want to be when you grow up?
- What excites you?
- What kind of support systems do you have?
- How do you take care of yourself? Relieve stress?
Networking Toolkit...

Take Home Messages:

• Have at least 5 mentors
• ASK!
• Be Authentic
• Listen (with your heart)
• Be honest, respectful, and mindful
• Know your Juice!
What is the metaphor?
Eleanor Roosevelt

• The purpose of life is to live it, to taste experience to the utmost, to reach out eagerly and without fear for newer and richer experience.
ONE LAST THING....
Geriatric/Elderly Squirrel
Thought for the Day...

In order to get burnt out.... You have to be on fire first!!
Thank you for this opportunity!!
Leadership

Tools for Building a Solid Career in Gerontology

ESPO Pre-Conference Workshop

November 16, 2016
New Orleans, Louisiana

Melissa O’Connor, PhD, MBA, RN, COS-C
Assistant Professor of Nursing
Speaker Bio

• National Hartford Center for Gerontological Nursing Excellence
  – Patricia Archbold Scholar (2010-2012)
  – Claire Fagin Fellow (2014-2016)

• Eugenie & Joseph Doyle Research Fellow, Center for Home Care Policy & Research, Visiting Nurse Service of New York

• Associate Faculty, NewCourtland Center for Transitions in Health, School of Nursing, University of Pennsylvania

• Associate Faculty, Business Analytics, School of Business, Villanova University
Leadership Topics

• Becoming an Effective Leader
• Leading Research Teams
• Health Policy Involvement
• Transitioning your Role
I. Becoming an Effective Leader

• GSA and ESPO a great early step
  – Colleagues working with/studying older adults not in GSA?
  – Take advantage of all the resources GSA/ESPO and AGHE offers

• Resources are plentiful
  – Amazon.com
    • 30,863 results for leadership (includes textbooks)
  – Barnesandnoble.com
    • 18,161 results for leadership
What is Leadership?

• Simple question yet complicated
• 519 million hits on Google

“A good leader always brings you back to yourself”
Stephen Covey 7 Habits of Highly Effective People

“Leadership is the ability to help people achieve things they don't think are possible.”
Randy Stocklin, co-founder and CEO, Readers.com
Leadership

communication
influence
mentor
ethic
decision
contribution

responsibility
motivation
support
vision
teamwork
management

BOSS

LEADER

MISSION

MISSION
Leader vs Manager

• Leader: A person who is followed by others

• Manager: A person controlling or administering a business or a part of a business

• A leader possesses an intangible quality so that whatever it is that they have - I want
  – The position or title does not make them a leader
Qualities of a Good Leader

- Focus
- Accountable
- Persistent
- Confident
- Inspired
- Passion
- Innovative
- Risk takers
- Patient
- Integrity

- True to themselves
- Open minded
- Transparent
- Decisive
- Personable
- Empowering
- Good communicators
- Positive
- Steady (don’t panic)
- Generous with their time
Additional Thoughts

• Do everything with excellence

• Age is not important - experience, knowledge and ability to lead is

• Don’t wait until you are in a leadership role to develop leadership skills

• Regardless of your current position, start being a leader now
  – This is where you are today - it’s not where you are going
  – “Leadership is a choice, not a position” Stephen Covey
Be Willing to Fail

“I **missed** more than nine thousand shots in my career. I’ve **lost** almost three hundred **games**. Twenty-six times I’ve been **trusted** to take the **game winning shot** and **missed**. I’ve **failed** over and over again in my life. **And that is why I succeed.**”

- Michael Jordon
Collaborate

• Say “yes!” but be selective
• Interprofessional collaboration is critical
• Celebrate your successes and the successes of others
• Importance of mentors
  – Ask for constructive criticism
  – Be a good mentee
II. Leading Research Teams

“As modern research methods have become more specialized and the true complexity of today’s most pressing health issues and diseases is revealed, collaborations among scientists trained in different fields have become essential for exploring and tackling these problems. This specialization of research methods has made interdependence, joint ownership, and collective responsibility between and among scientists near requirements.” NIH, 2010
Team Science

– The group process is fundamental to creating new knowledge
  • Collaboration, synergy
  • Some studies have older adults on the research team!
  • NIH document on team science:
Team Effort

• Choose your team wisely - do you have the expertise you need?
  – Team members are identified when you are writing the grant
  – Each team member should bring specific expertise to address the research problem
  – As a junior scientist it’s a good idea to have your mentor on the team
    • Helps you to make informed decisions and avoid frustration
Plan Ahead

• Identify priorities - what is fundamental to achieving your goal?
  – Preparation & submission of the grant
  – Implementation & completion of the study
  – Manuscript submission

• Write out your plan
  – Worth investing this time upfront
  – Clearly articulate your vision to team members
  – Identify team members’ responsibilities
  – Most of the time this goal is not your only focus
Plan Implementation

• Refer to your plan often
• Clearly and decisively communicate and share information with team members
• Hold regular team meetings
  – Phone or web
  – Meet in person as often as possible
• Provide opportunity for students to participate if appropriate
**Funder:**

**Dates:**

**Research Team/Expertise (contribution to the study):**

**Specific Aims:**

**Timeline:**

<table>
<thead>
<tr>
<th></th>
<th>Feb</th>
<th>Mar</th>
<th>Apr</th>
<th>May</th>
<th>June</th>
<th>July</th>
<th>Aug</th>
<th>Sept</th>
<th>Oct</th>
<th>Nov</th>
<th>Dec</th>
<th>Jan</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2016</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Obtain IRB</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Approvals (MOC)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Request data</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(MOC, AH)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prepare data</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>sets for</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>analysis (AH)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Analyze data</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(AH)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Manuscript</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>presentation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>preparation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(MOC)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Winter 2016** | **Spring 2016** | **Summer 2016** | **Fall 2016** | **Winter 2017** | **Spring 2017**
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Obtain IRB</td>
<td>Upload data</td>
<td>Draft Introduction &amp; Background (MOC)</td>
<td>Draft Methods &amp; Results (AH)</td>
<td>Renew IRB approvals (MOC)</td>
<td>Peer-reviewed conference presentation (MOC)</td>
</tr>
<tr>
<td>approvals (MOC)</td>
<td>(MOC)</td>
<td>(MOC)</td>
<td>(AH)</td>
<td>(MOC)</td>
<td>(MOC)</td>
</tr>
<tr>
<td>Request data</td>
<td>Prepare data for analysis (AH)</td>
<td>Review of Introduction &amp; Background (All)</td>
<td>Draft Discussion (MOC)</td>
<td>Review of manuscript (All)</td>
<td>Review of next grant draft (All)</td>
</tr>
<tr>
<td>(MOC, AH)</td>
<td>(AH)</td>
<td>(AH)</td>
<td>(MOC)</td>
<td>(MOC)</td>
<td>(MOC)</td>
</tr>
<tr>
<td>Variable</td>
<td>Begin data</td>
<td>Complete data</td>
<td>Review of</td>
<td>Edits to</td>
<td>Edits to</td>
</tr>
<tr>
<td>identification</td>
<td>analysis (AH)</td>
<td>analysis (AH)</td>
<td>Methods, Results &amp; Discussion (All)</td>
<td>manuscript (MOC)</td>
<td>next grant draft (All)</td>
</tr>
<tr>
<td>(All)</td>
<td>(AH)</td>
<td>(AH)</td>
<td>(MOC)</td>
<td>(MOC)</td>
<td>(MOC)</td>
</tr>
<tr>
<td>Identify</td>
<td>Draft manuscript outline (MOC)</td>
<td>Discussion of results (All)</td>
<td>Edits to Methods &amp; Results (AH)</td>
<td>Manuscript Submission (MOC)</td>
<td></td>
</tr>
<tr>
<td>potential</td>
<td>(MOC)</td>
<td>(All)</td>
<td>(AH)</td>
<td>(MOC)</td>
<td>(MOC)</td>
</tr>
<tr>
<td>target</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>journals (KB)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identify</td>
<td>Review manuscript outline (All)</td>
<td>Edits to Introduction &amp; Background (MOC)</td>
<td>Edits to Discussion (MOC)</td>
<td>Grant development (MOC)</td>
<td></td>
</tr>
<tr>
<td>potential</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>dissemination</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>plan (SG)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identify</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>potential</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>dissemination</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>plan (SG)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Draft submission to peer-reviewed conference (MOC) | Review of conference submission (All) | Draft outline of next grant (MOC) | Submission to peer-reviewed conference (MOC) |
III. Health Policy Involvement

• Say what????
  – Issues are too big & complex
  – Most of us are less familiar world of policy and politics
  – Many of us do not feel prepared to take this on
Health Policy Defined

• Product of our values & priorities

• “...decisions, plans, and actions that are undertaken to achieve specific health care goals within a society” (World Health Organization)

• Within your area of expertise, you likely see the impact of health policy every day and may even study it’s impact
  – Patient safety & satisfaction, access to services, clinical outcomes, and health disparities
Health Policy

• Refers to influencing a change in policies, laws, or regulations that govern the larger health care system

• Translating results of research to clinical practice is essential

• Often considered “advocacy”
  – A little less scary
  – As an advocate - YOU are the voice of older adults

• Strategy to improve something
Ten Public Health Achievements in the 20th Century (CDC)

• Vaccinations
• Motor vehicle safety
• Family planning
• Decline of death from heart disease & stroke
• Safer and healthier foods

• Infectious disease control
• Tobacco as a health hazard
• Fluoridated drinking water
• Healthier moms & babies
• Future directions of public health
Role of Policy In These Achievements

• **Vaccinations:** school entrance mandates, funding to increase access

• **MV safety:** speed limits, road construction, seat belt and helmet laws

• **Infectious disease control:** improved living conditions (water supply, waste disposal), evidenced-based standards of care
Where to Begin?

• Start small.....local, state then federal levels

• Access resources designed to help you learn more about current health care issues and the legislative process – Seek out
  • Annual state legislative days
  • Policy internships or fellowships
  • Workshops & Professional organizations

• Evidence-based practice is critical to health policy – gather a good base of evidence to present to decision makers
Teaching

• Incorporate policy and organizational involvement into education
  – foster passion for political involvement in students and increase awareness of our role and potential influence in policy development
You Are In Luck

• You are all GSA members...
  – National Academy on an Aging Society
    • https://www.geron.org/programs-services/policy-center
  – GSA’s policy/advocacy tool kit
    • https://www.geron.org/programs-services/policy-center/advocacy

• AARP Public Policy Institute
  – http://www.aarp.org/ppi/
VI. Transitioning your Role

• Speak with those who have recently transitioned
  – My favorite question: “If you had to do it again, what would you do differently?”

• Take advantage of resources offered in your PhD program, post doc or as new faculty
  – Seminars, books, webinars
Learn About The Culture

• Of your new environment or new role
  – Find an institutional mentor within your discipline and/or interprofessionally
    • Help you learn about the culture
    • Show you the ropes at your institution
    • Make introductions within your school and university-wide
    • Do not get involved in the past history or politics

• Make an effort to meet your colleagues
  – Try to meet someone new every month
    • Invite them for coffee or tea
Make Yourself At Home

• Customize your environment
  – Words or objects of encouragement
  – Comforts of home

Life is a journey
AND ONLY YOU HOLD THE MAP
• Carve out time for your scholarship
  – Block it off in your calendar
  – Where do you work most efficiently?
    • Home, office, library, coffee shop
  – Advocate for yourself
    • Try to teach the same course (prep is finished)
    • Team teach
    • Download
Transitions

• From student/post-doc to faculty
  – Balancing increased:
    • responsibility
    • new location
    • new culture
  – Expect to have a challenging year
    • My experience
    • It’s supposed to be a challenge
Published Resources Available

• The Academic Job Search Handbook
  – Julie Miller Vick & Jennifer S. Furlong

• Inside Higher Ed
  – Grad Student to Professor

• The Chronical of Higher Education
  – From Grad Student to Faculty Member
    http://www.chronicle.com/article/From-Graduate-Student-to/124119/?sid=at

• You are not the first to experience this
  – speak with someone who has recently transitioned
Make A Plan

• If you don’t know the rules of the game you can’t win
  – Understand where the bar is set
  – Institutional mentor can help

• Maintain and add research and teaching mentors
  – Be a good mentee

• Start a tenure file from day 1
Transitioning Your Role

“If you can’t fly then run, if you can’t run then walk, if you can’t walk then crawl, but whatever you do you have to keep moving forward.” — Martin Luther King Jr

Keep Moving Forward
Thank you

melissa.oconnor@villanova.edu