A new supplement to GSA’s Public Policy & Aging Report (PP&AR) reports on the accomplishments of the Change AGEnts Initiative, a major three-year program administered by GSA with funding from The John A. Hartford Foundation.

The initiative was designed to harness the collective strengths, resources, and expertise of current and former Hartford Foundation grantees — to make sustained policy and practice changes to improve the health of older adults, their families, and their communities.

“We have been honored to be part of this amazing endeavor that is continuing to impact the lives of older adults, their family members, and health care professionals alike in diverse settings,” said GSA Senior Director of Professional Affairs and Membership Patricia M. D’Antonio. “The field will long benefit from the collaborations that were started, supported, and furthered by the leaders and innovators who make up the Change AGEnts Community.”

In a collection of articles, the PP&AR documents the initiative's numerous achievements. Among them: leadership development activities, educational institutes and webinars, grant funding, and an online platform for resource and knowledge sharing; the acceleration of practice change through two interprofessional

In Delaying Aging, Caloric Restriction Becomes Powerful Research Tool

“Caloric Restriction and Restrictive Diets: Interventions that Target the Biology of Aging,” as the January special issue of The Journals of Gerontology, Series A: Biological Sciences and Medical Sciences is titled, contains a collection of articles with new research on a proven method for increasing longevity in many organisms — including the results of the first-ever clinical trial of caloric restriction (CR) in humans.

“In keeping with the extraordinary track record of The Journals of Gerontology in multidisciplinary aging studies, the special issue features CR studies ranging from simple unicellular models to human clinical trials,” said Biological Sciences Co-Editor-in-Chief Rozalyn M. Anderson, PhD, FGSA, who leads the Metabolism of Aging Research Program at the University of Wisconsin-Madison.

“One of the things that people sometimes miss is the amazing fact that aging can be altered; CR research proves this.”

The beneficial longevity effect of a simple reduction in caloric intake was first established in rodent studies more than 80 years ago. In the last few decades as genetic techniques have advanced, scientists have made considerable progress in identifying cellular and systemic processes that likely contribute to the increase in disease vulnerability that is associated with aging.

Traditionally, these insights have come from studies of short-lived laboratory animals, but the recent confirmation of the relevance of the CR paradigm to primates has placed renewed emphasis on studies that delve into the mechanisms of delayed aging by CR.

“Remarkably, caloric restriction has been shown to be effective in delaying aging in multiple species and the results in humans look equally promising,” Anderson said. “Indeed for many studies, CR is used as the gold-standard
From the Executive Director

Your Manuscripts Are in Great Hands

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

Happy New Year, everyone! As 2018 unfolds, I am delighted to showcase the many exciting developments happening in GSA’s journal publishing operation that will make the new year bright. Peer-reviewed journals are the mechanism through which a field of science has a conversation with itself, and GSA’s journals are leading the dialog in aging.

We welcome four new editors-in-chief as of January 1. For the first time, we have a pair of co-editors — Rozalyn Anderson and David Le Couteur — leading the Biological Sciences section of The Journals of Gerontology, Series A: Biological Sciences and Medical Sciences. With Rozalyn based in the U.S. and David based in Australia, I like to think that the “sun never sets” on Series A! It’s a tangible expression of how our journals reflect collaboration in the broad international scientific community.

Also joining the GSA journal editor team is Derek Isaacowitz, heading the Psychological Sciences section of The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences, and Joshua Wiener, who’s taking the helm of Public Policy & Aging Report.

We just renewed our contract with Oxford University Press (OUP), our committed academic publishing partner — extending our arrangement with them until 2023. We’re appreciative of the staff members at OUP who’ve worked with us as our journals have reached new heights. GSA’s impact factor metrics have never been stronger; as a result, we currently hold three of the top four positions in Journal Citation Reports: Social Sciences Edition’s Gerontology category. The science submitted to these journals by GSA members has put us at the top of the pack!

Additionally, GSA worked with OUP in 2017 to develop a central online portal to content across all GSA journal titles. The features available on this new site include cross-journal search functions; news and information; highlighted content; YouTube videos; and much more. To get free access to all journal articles, GSA members should log on first at www.geron.org/publications and then click on any journal title to be taken to the family site at academic.oup.com/gsa.

Here in Gerontology News, we now have a GSA Journal News page every month. Visit page 6 to see what’s happening in the world of our journals right now. In case you missed the last few issues, there’s a lot to be excited about. Starting in 2018, Series B will increase its frequency of publication from six to eight issues per year — giving authors a reduced average time for their papers to appear in print. Over at Series A, they recently adopted a rapid publication model. This enables authors’ papers to be published online soon after they have been accepted for publication, before advance access publication, and well ahead of their appearance in the printed journal. Our long-running interdisciplinary journal, The Gerontologist, has introduced a revamped Review Article section to elevate evidence synthesis in the advancement of Gerontological research. And GSA’s new online open access journal, Innovation in Aging, is celebrating its first anniversary with the appointment of new associate editors and an advisory board. Read more on page 6 to learn who’s joining the team.

I’m deeply grateful to everyone who contributes to making the journals a shining jewel in GSA’s crown. Our editors and article contributors are probably the most visible, but there are many others in the community who are crucial links in the chain — article reviewers, associate editors, managing editors, production editors, members of the editorial board, and more. You’ve all done an amazing job!

James

Letters to the Editor

We will publish letters to the editor in response to issues raised in the newsletter. Please limit letters to no more than 350 words. Letters should include the writer’s full name, address, and telephone number. Letters will be accepted or rejected at the sole discretion of the editors and may be edited for clarity or space. Send to: tkluss@geron.org

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In Memoriam

Michael Anthony Creedon, DSW, passed away on September 5, 2017, at age 76. Creedon arrived in the U.S. in 1964 as a young priest and served in the Diocese of Richmond for nine years. He earned a doctorate in social work and his career as a gerontologist took him all over the world. Through his tenure as a professor and a lecturer, he helped many transition to retirement, as well as helping to educate those working in service to older adults. He also worked with financial institutions and governments to prevent financial abuse of older adults.

Gunther L. Eichhorn, PhD, FGSA, passed away on February 2, 2017, at age 89. His professional appointments included serving as a professor of chemistry at Louisiana State University and Georgetown University; a guest scientist at the Naval Medical Research Institute; chief of the Laboratory of Cellular and Molecular Biology in the Gerontology Research Center at the National Institute on Aging (NIA); acting scientific director at the NIA; and a National Institutes of Health (NIH) scientist emeritus. He received the Maryland Chemist of the Year Award, NIH Director’s Award, and U.S. Senior Executive Service Award. He was an editorial board member of Advances in Chemistry, Bioinorganic Chemistry, Journal of Molecular Catalysis, Mechanisms of Aging and Development, Journal of Inorganic Biochemistry, and Protein Expression and Purification.

New Books by Members

- “The Longevity Economy,” by Joe Coughlin, PhD, FGSA. Published by PublicAffairs, 2017.

Members in the News

- On October 7, Elena Portacolone, PhD, was interviewed by The Guardian in an article titled “Can You Afford to Get Married?” She discussed how older adults living alone may have trouble with day to day household tasks.
- Pamela Teaster, PhD, FGSA, was interviewed by The New Yorker on October 7, in a piece titled “How the Elderly Lose Their Rights.” The article focused on the guardianship system in the U.S.

Colleague Connection

This month’s $25 amazon.com gift certificate winner: Monika Ardelt, PhD, FGSA

The recipient, who became eligible after referring new member Kimberly Wingard, MA was randomly selected using randomizer.org. For more details on the Colleague Connection promotion visit www.geron.org/connection.

Member Spotlight

GSA’s website features monthly Q&A sessions with distinguished members. The current spotlight shines on: Patricia Fletcher, BA, MA, MS

Visit www.geron.org/membership to ask questions and read previous interviews. Connection promotion visit www.geron.org/connection.

Sullivan-Marx Elected to Lead American Academy of Nursing

Eileen Sullivan-Marx, PhD, RN, FAAN, FGSA, dean and Erline Perkins McGriff Professor of New York University Rory Meyers College of Nursing, has been named president-elect for the American Academy of Nursing. She will serve in the role from 2017 to 2019 and will transition to the role of the Academy’s president in 2019 for a two-year term. Sullivan-Marx, who joined NYU as dean of the College of Nursing in 2012 after a distinguished career at the University of Pennsylvania School of Nursing, is a nationally recognized nurse leader, educator, and clinician. She is known for her research and innovative approaches in primary care and testing payment methods—particularly through Medicaid and Medicare — for nurses, sustaining models of care using advanced practice nurses, and for developing health policy in community-based settings.

Demiris Earns University Professorship Title

George Demiris, PhD, FGSA, has been named the University of Pennsylvania’s 22nd Penn Integrates Knowledge University Professor. Demiris, a leader in new technologies for e-health and home-based health care, will hold joint faculty appointments in the Department of Biobehavioral Health Sciences of the School of Nursing and the Department of Biostatistics, Epidemiology and Informatics of Penn’s Perelman School of Medicine. Demiris’ work uses data and informatics to improve health-care delivery and education, especially in advancing home-based technologies for older adults and patients with chronic conditions and disabilities, using, for example, smart homes, ambient assisted living systems and telehealth for home and hospice care.

GSA Connect Corner

- Lynn Friss Feinberg, MSW, FGSA: “The AARP Public Policy Institute has released a new paper on Emerging Innovations in Managed Long-Term Services and Supports (LTSS) for Family Caregivers. This paper provides direct insights from managed care leaders about family caregiver supports. It highlights examples of how progressive managed care plans are supporting family caregivers who are caring for plan members with LTSS needs.”
- Ronni Chernoff, PhD: “We have a participant in our on-line self-study in geriatrics who is in need of a clinical mentor for a 10 hour observation. Our “scholar” lives in Lagos, Nigeria. Does anyone have any contacts in the geographic area with whom we can follow up? Any help or guidance would be immensely appreciated.”
Tax Bill, Appropriations Carry Implications for Older Adults

Congress has just passed a tax package that will affect nearly every individual and business in the U.S. In the ironic shadow of this tax bill that is paid for in part by increasing the national debt by an estimated $1.5 trillion (yes, trillion), Congress continues its partisan appropriations wrangling over a relatively few billion dollars in defense and non-defense discretionary spending.

The tax bill (H.R. 1) and the appropriations continuing resolution (CR) may be foremost on the minds of Congress for political and practical reasons, but there are many other critical issues and bills that should be addressed sooner rather than later: The Children's Health Insurance Program (CHIP) authorization expired in September and states will run out of funding for children’s health care in January; protections for “Dreamers” under the Deferred Action for Childhood Arrivals (DACA) program; a proposed trillion-dollar infrastructure improvement bill that has languished; and disaster aid for hurricane, fire, and flood ravaged areas across the country and in Puerto Rico.

Further, proposals to stabilize the Affordable Care Act’s (ACA) health insurance exchanges are desperately needed, although their benefits may be diminished with the repeal of the individual mandate (in the tax bill) and its effect on the marketplace, coupled with the Trump Administration’s reduced enrollment period and outreach. Senators Lamar Alexander (R-TN) and Patty Murray (D-WA) have a short-term, two-year bipartisan proposal to stabilize the exchanges and the insurance markets. There are more than 200 groups supporting the plan, and the Senate appears to have more than 60 votes (including 12 Republicans), but the vote will not take place this year. The stability of the insurance market is very important for adults age 55 to 64.

Appropriations

On the appropriations front, as of this writing, the federal government passed a continuing resolution (CR) providing appropriations until January 19. First the House passed a bill (H.J. Res. 124 — the “Cromnibus”) to keep government running, which included full-year funding for defense appropriations and continued funding for the CHIP. After days of negotiating, the Senate finally agreed and also cleared a bill, by a vote of 66 to 32, temporarily funding the CHIP ($2.85 billion through March 31). The pay-as-you-go automatic cuts to Medicare and other programs were waived in the current CR. These automatic cuts are tied to the deficit that the tax bill creates under the provisions of the Statutory Pay-As-You-Go Act of 2010 (P.L. 111-139). The CR does not lift caps on defense spending nor does it provide disaster relief funds.

The House Labor, Health and Human Services, Education, and Related Agencies Appropriations Subcommittee provided a total of $35.2 billion for the National Institutes of Health (NIH), which is an increase of $1.1 billion. The Senate subcommittee of the same name provided $36.1 billion, a $2 billion increase over FY 2017 funding. That would amount to about a twenty percent increase in funding compared to the past three years. As long as Congress continues to fund programs through these continuing resolutions based on FY 2017 funding levels, the NIH will not see either of these increases.

The larger issue for such an agreement will be whether the precedent of parity between defense spending and non-defense discretionary spending will continue. This was started with the Budget Control Act of 2011 (P.L. 112-25) and has continued with subsequent appropriations deals that have raised the spending caps to avoid sequestration cuts. Without increasing the funding caps, we could see cuts of more than $12 billion for current levels.

A Two Act Play

The tax bill is the biggest element of the Republican-passed (October 26) budget resolution (H. Con. Res. 71). The tax bill is a budget reconciliation bill, so it needed only a simple majority in the Senate to pass. This is the first act of a two-act play that has been in rehearsal for many years. The second act, written by Speaker of the House Paul Ryan (R-WI), will be performed next year when the Republican leadership will move forward with legislation to make program cuts and major entitlement reforms. The same budget resolution that enabled the Republican-only tax bill to pass while exploding the federal deficit also includes $473 billion in cuts to Medicaid, approximately $1 trillion in cuts to Medicare, and $800 billion in cuts to non-defense discretionary programs like the Older Americans Act.

There are far too many provisions in the tax bill for me to cover here, so I will just cover a few of particular note for older adults. The final bill kept the medical expense deduction, which is used by 6.3 million people with incomes below $75,000, and decreased the threshold rule from 10 percent of adjusted gross income to 7.5 percent for two years. This is particularly important for those who have high long-term care expenses, and AARP made this their biggest issue during the process.

The new law eliminates personal exemptions, but doubles standard deductions to $12,000 for individuals and $24,000 for married couples filing jointly. It also keeps the extra standard deduction for those 65 and older, currently $1,250 for individuals, $1,550 for heads of households, and $2,500 for couples who are both 65 and older. AARP stated that “among Americans 65 and
older, more than 5 million would get no tax break in 2019 and 5.6 million would see no tax decrease by 2027."

The new tax law repeals the ACA's individual mandate and the penalty for not buying insurance beginning in 2019. That will increase the number of people without insurance by about 13 million by 2027, according to the Congressional Budget Office. The theory is that lowering the number of individuals in the insurance pool will lead to increased premiums in the individual market by 10 percent in most years over the next decade. It is estimated that 3.3 million adults age 55 to 64 currently receive their health insurance under the ACA. According to an AARP policy analysis, those 50 to 64 would face average premium increases in the individual market of up to $1,500 in 2019. Further, the analysis reports that the uninsured rate for those 50 to 64 years of age has fallen from 15 to 16 percent in the last few years and that this repeal may reverse the trend.

Under the new law, state and local taxes deductions are capped at $10,000. It is not yet known how this could affect the critical state-funded community-based services for older adults and others. There was a good bit of discussion around the potential negative impact of doubling the standard deduction on charitable giving. Researchers have stated that doubling the deduction reduces the number of taxpayers who itemize on their taxes, thereby decreasing charitable contributions by an estimated $13 billion. Such a loss in contributions could have a significant effect on the non-profit sector serving older adults.

There are, of course, positive aspects of the law, including tax cuts for many low and middle-income families and a family and medical leave tax credit. (And I must mention the lower tax rate on craft beer and improvements for the wine industry.)

Next Year

As I finish up writing my last column of the year and the first you will read in 2018, the tax bill has just passed and is followed by the winter solstice, the darkest day of the year. However, I remain optimistic. Yes, the process was terribly partisan with little transparency. There was little time to analyze the legislation and bring in experts to challenge the statements that its drafters made. And the substance of the bill will deepen our deficit while benefitting those who need it the least, and all based once again on disputed assumptions tied to trickle down economics. Yet, I believe that some of the purposes of the bill have merit. Further, it appears from polling on the bill that the majority of the American people have not been fooled by the rhetoric.

Other reasons to be optimistic include the post-election pushback symbolized by the Women's March, and more recently the #MeToo movement, some surprising election results in the deep south, and Congress allowing the Russia investigation to move forward. More worrisome going into 2018 to me are the continued threats to the free press, the rule of law, and the lack of civility in the way we treat our political opponents. But I do not believe this is our “darkest hour.” It is part of a cycle of progress, then pushback, regression, and regrowth. Next year we will begin anew our work to reauthorize the Older Americans Act and the Geriatrics Workforce Enhancement Program and better fund the NIH. And we will have our hands full protecting Medicare, Medicaid, Social Security, and non-defense discretionary spending for those most in need, including low-income older adults. I look forward to the challenge and to using the research, knowledge, and expertise of GSA's members in these efforts that are part of our amazing democracy.

Recent GSA Policy Actions

GSA, represented by Senior Director of Professional Affairs and Membership Patricia D’Antonio, participated in the Better Medicare Alliance Convening on Medicare Consumer Education. The convening was an opportunity for collaborative conversation with the goal of identifying potential next steps to address health literacy and understanding of Medicare Advantage. GSA is a member of the Better Medicare Alliance.

GSA signed on to a letter from the Leadership Council on Aging Organizations (LCAO) to House and Senate Appropriations Committees to urge them to protect funding for the Medicare State Health Insurance Assistance Program (SHIP) for FY 2018. SHIPs receive funding from the Administration for Community Living and provide one-on-one, face-to-face assistance. Because of the labor-intensive, in-person nature of SHIP work and the high demand for SHIP services, volunteers have helped paid staff meet beneficiary needs since the inception of the program. Given Medicare’s complexities and the reality of volunteer turnover, SHIPs must dedicate year-round resources to recruiting volunteers and managing their volunteer programs or they will have none. The letter requested that the committees consider the Senate bill’s proposal to level fund SHIP at $47.1 million. If a deal is reached to raise the Budget Control Act caps, the LCAO requested that funding at least be restored to the FY 2016 level of $52.1 million.

GSA signed on to a letter from the Leadership Council on Aging Organizations in support of the Patient Choice and Quality Care Act of 2017 (S.1334 and H.R.2797). The bill would create a new Medicare model for advanced illness care and management that will provide eligible Medicare beneficiaries the opportunity to voluntarily engage the services of an interdisciplinary team. Such a team would plan care interventions that are directly aligned with the individual’s goals of care, values, and preferences and are designed to meet the beneficiary’s physical, medical, psychosocial, emotional and spiritual needs, as well as support family caregivers.
Continued from page 1 – PP&AR Supplement Recaps Change AGEnts Initiative

change networks, focused on dementia caregiving and patient-centered medical homes; and increased public attention and support for practice change through individual and collective communication efforts.

The Change AGEnts Initiative was guided by a leadership team of national experts in interprofessional practice change, including Laura Gitlin, PhD, FGSA, director of the Center for Innovative Care in Aging at Johns Hopkins University; Alan Stevens, PhD, FGSA, the director of the Center for Applied Health Research at Baylor Scott, and White Health; and representatives from GSA, The John A. Hartford Foundation, and Strategic Communications and Planning.

“I continue to hear from Change AGEnts that the initiative was a transformative experience,” said Marcus Escobedo, MPA, the senior program officer and communications director for the Hartford Foundation. “I’m confident we will see ripple effects from the passion and expertise of everyone involved in the program for years to come. We thank The Gerontological Society of America, Strategic Communications and Planning, the leadership team, and each and every Change AGEnt for working to improve the care of older adults.”

The two practice change networks provide examples of how the initiative is making an ongoing impact. The Dementia Caregiving Network has spurred several programs, such as those that engage family caregivers and develop performance/quality measures for dementia care that are person- and family-centered. Likewise, the Patient-Centered Medical Home Network released a report, “Patient-Centered Medical Homes and the Care of Older Adults: How Comprehensive Care Coordination, Community Connections, and Person-Directed Care Can Make a Difference.”

The expansion of the number of editors reflects the diversity of aging-related science that Innovation in Aging seeks to publish. Innovation in Aging has also formed an Advisory Board to provide direction for the journal — including its mission and scope; the structure of the editorial board; its processes for soliciting, reviewing, publishing, and promoting research articles; and methods for ensuring its future success. The Advisory Board of Innovation in Aging includes Jacqueline L. Angel, PhD, FGSA; of The University of Texas at Austin; Toni C. Antonucci, PhD, FGSA, of the University of Michigan; Kenneth Covinsky, MD, of the University of California, San Francisco; Kenneth F. Ferraro, PhD, FGSA, of Purdue University; Karl Pillemer, PhD, FGSA, of Cornell University; and Wendy A. Rogers, PhD, FGSA, of the University of Illinois Urbana-Champaign.

Innovation in Aging is an online only, fully open access journal that allows free viewing of all content. Open access journals have no subscriptions; instead, publication charges offset the cost of the journal. To mark the launch of Innovation in Aging, the GSA and Oxford University Press are providing funds to cover all publication costs for authors for the first 200 articles published in the journal. See geron.org/innovateage for full author guidelines.

Innovation in Aging Welcomes New Editors, Advisory Board

Innovation in Aging, GSA’s newest scientific journal, has welcomed eight associate editors and one deputy associate editor to the editorial team: Christine E. Bishop, PhD, FGSA, of Brandeis University as the associate editor for economics of aging; Anne Collins McLaughlin, PhD, of North Carolina State University as the associate editor for technology; Alison Phinney, PhD, RN, FGSA, of the University of British Columbia as the associate editor for qualitative research; Corinne Reczek, PhD, of The Ohio State University as the associate editor for relationships & well-being; J. Tina Savla, PhD, FGSA, of Virginia Tech as the associate editor for methodology; Jennifer Tehan Stanley, PhD, of the University of Akron as associate editor for psychological sciences, Roland J. Thorpe Jr., PhD, of Johns Hopkins University as associate editor for minority health/health disparities; Michael Weiner, MD, MPH, of Indiana University, Regenstrief Institute, Inc., and the U.S. Department of Veterans Affairs as associate editor for health outcomes research and informatics; and Elaine C. Wiersma, PhD, of Lakehead University as the deputy associate editor for qualitative research.

The outcomes of several Action Awards are reported in the PP&AR, including support for the Downtown Women’s Center in Los Angeles, the Utah Caregiver Support Program, and the Senior Housing Preservation coalition in Detroit. Across four cycles of funding, more than 17,000 older adults and family members and 3,000 health professionals were served by projects supported by Action Awards. Additionally, many grantees leveraged their funding to secure more than $3 million additional funds toward continued work.

GSA members have free access to this and other issues of PP&AR by logging in at www.geron.org/publications.
ESPO Looks Back at 2017 and Forward into 2018

By Catheryn Koss, JD, PhD

Under the leadership of Past Chair Kristen Porter, ESPO had a productive and successful 2017. This column will highlight some of ESPO’s past accomplishments, and look forward to what lies ahead in 2018.

International Association of Gerontology and Geriatrics (IAGG) World Congress

ESPO partnered with the International Association of Gerontology and Geriatrics (IAGG) Council of Student Organizations (CSO) to sponsor several successful workshops and activities at IAGG World Congress in San Francisco.

Building on the success of our first pre-conference workshop at the 2016 GSA Scientific Annual Meeting, we organized a second half-day preconference workshop: “Crossing Geographic and Disciplinary Boundaries: Professional Development for Emerging Scholars.” Students and emerging scholars coalesced with presenters from across the globe, gaining knowledge and skills essential to building an interdisciplinary and sustainable career in aging.

To ensure that international visitors felt welcome, the ESPO International Task Force hosted a networking event and provided a tip sheet for these delegates.

ESPO and CSO also co-hosted three informal chats in the student lounge. Topics included how to establish a student organization, tips and training opportunities for new researchers, and writing dissertations and publications. We were fortunate to be joined for one informal chat by Dr. Marie Bernard, deputy director of the National Institute on Aging (NIA). Other NIA staff were also present, further enriching our experience.

Finally, ESPO was involved in organizing symposia at the World Congress. To foster international collaboration, ESPO and CSO organized the symposium, “Collaborative Networks for Emerging Scholars: Local, Regional, and International Perspectives.” GSA’s Biological Sciences Section hosted a symposium titled “ESPO New Investigators Biological Sciences Session.”

Dissertation Writing Groups

An ESPO special task force, led by 2017 ESPO Chair Kristen Porter, launched a Skype-based peer-led Dissertation Writing Group (DWG) program. Almost 50 members have participated so far. In addition to evaluating the summer pilot program, the task force created numerous documents, manuals, and webinars so that the groups can be self-led and sustainable. The DWG has now been approved as a formal ESPO member benefit. More information about the DWG can be found at www.geron.org/dwg.

Professional Development for ESPO Members

The ESPO Webinar Task Force and the Minority Issues in Gerontology Committee reps collaborated on a webinar, “Culturally Adapting Interventions to Promote Healthy Aging among Latinos: Best Practices in Research and Publishing.” Dr. Adriana Perez presented best practices in research and publishing to meet the needs of an increasingly-diverse older population.

ESPO also sponsored the webinar “Aligning Your Scientific Inquire with Public Policy: Recommendations from Experts in Policy and Aging,” in which a panel of experts offered advice on how to share research findings with policymakers in order to promote the health and well-being of older adults. These and other webinars can be viewed at www.geron.org/webinar.

The ESPO Community on GSA Connect has been active and growing. There are now more than 120 resources in the ESPO Community Library. ESPO members can find useful information on thriving in graduate school, landing a job, and succeeding as a new professional both in academic and non-academic career tracks.

Looking Ahead

In 2018, ESPO will focus on new ways to meet the needs of our transitional members. We will continue to offer member benefits such as the Dissertation Writing Group program, Mentor Match, and the Resource Library in the GSA Connect ESPO Community. Look for future announcements about ESPO-sponsored webinars. And of course, ESPO will host numerous programs and events for students and emerging scholars during GSA’s 2018 Annual Scientific Meeting in Boston.

Thanks!

These accomplishments would not be possible without the dedication and hard work of ESPO’s volunteers and leaders. Thanks, everyone! If you would like to get involved with ESPO, contact us at espo@geron.org.
Assessment and treatment of Alzheimer’s disease and dementia

Benjamin T. Mast / Brian P. Yochim

Alzheimer’s Disease and Dementia

US $29.90 / € 24.95
ISBN 978-0-88837-503-1

As the number of older adults with dementia continues to skyrocket, every health care professional needs accurate, up-to-date knowledge of the conditions, their prevention, and possible treatments. This compact, evidence-based book discusses essential aspects of the diagnosis, assessment, and interventions of Alzheimer’s disease and the syndromes of dementia and mild cognitive impairment. It reviews the diagnostic criteria from the National Institute on Aging, Alzheimer’s Association, and the DSM-5 and provides a broad range of treatment options, including psychosocial, educational, and lifestyle interventions.

“This is the one book that healthcare providers across disciplines should have ready access to in their work with individuals and family members who are struggling with possible or clearly established dementias.”

Shane S. Bush, PhD, ABPP, Board Certified in Clinical Neuropsychology and Geropsychology, VA New York Harbor Healthcare System, Brooklyn, NY & University of Alabama, Tuscaloosa, AL.

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Final Evaluation Report Issued from Money Follows the Person
The Money Follows the Person (MFP) demonstration, which supports states’ efforts to help Medicaid beneficiaries living in long-term care facilities transition back to the community, has released its 2015 annual evaluation report. MFP grantees are using funds from the U.S. Centers for Medicare & Medicaid Services (CMS) to expand the mix of services to better meet peoples’ support requirements during their first year in the community. This report is the seventh and final in a series of annual reports that Mathematica Policy Research is producing for the national evaluation of the MFP demonstration. It provides basic information about the program and how it grew and changed since transitions began in 2007. It also presents estimates of program outcomes and provides the underlying information necessary for a report to Congress. Access the report at bit.ly/2wyjU6M.

Survey Draws Attention to Holiday-Time Social Isolation
A survey released in December by the AARP Foundation finds that people were feeling good about spending time with friends and family during the holiday season, with many survey respondents noting that they were feeling happy (67 percent), loved (47 percent), joyful (46 percent) and excited (44 percent). Yet the same survey also found that three-in-ten respondents (31 percent) said they have felt lonely during past holiday seasons. In addition, four-in-ten (41 percent) of respondents said they have worried about a friend or family member feeling lonely during the holidays. The survey was released in support of Connect2Affect, the AARP Foundation’s ongoing effort to build awareness about the impact of loneliness and social isolation that also includes resources created to help people learn about how they can stay connected. GSA is a member of the Executive Council of Connect2Affect. “The survey results do give cause for concern,” said AARP Foundation President Lisa Marsh Ryerson. “Social isolation, which can be particularly hard felt during the holidays, has severe consequences on both emotional and physical well-being. Research shows the health effects of prolonged isolation are equivalent to smoking 15 cigarettes a day.” For more information about the holiday survey, social isolation and Connect2Affect, visit connect2affect.org.

AGHE Welcomes Meeting Registrants
AGHE’s 44th Annual Meeting and Educational Leadership Conference will convene in Atlanta, Georgia, from March 1 to 4. The theme is “The Global Business of Aging.” Researchers and policy analysts recognize that the increasing numbers of older adults have high economic value as contributors to the global economy. The extension of healthy life by 30+ years requires reframing the perception of older adults in purposeful activities. As educators in gerontology and geriatrics, there is an important role to play by creating an environment that supports innovation in degree programs, certificates, and work force training. Register now at aghe.org/events/annual-meeting/registration to get your first pick of pre-conference workshops, networking events, and hotel reservations. Visit aghe.org/am to learn more about the conference, program highlights, registration, and exhibiting and advertising.

Michigan Health Endowment Fund will Support Research into Healthy Aging at Wayne State
The Michigan Health Endowment Fund has awarded funds to Wayne State University to help prevent frailty in older African Americans in Metro Detroit. The project, called “Frailty Prevention in Older African Americans,” will pilot an evidence-based, integrative approach to preventing frailty. Indicators of frailty include unintentional weight loss, weakness, exhaustion, and low physical activity; having two or more of these indicators increases an older adult’s risk for early death and disability. Heather Fritz, assistant professor in the Department of Occupational Therapy and the Institute of Gerontology, will lead the project. The two-year project begins in March 2018 and will partner with the Rosa Parks Geriatric Center of Excellence to identify up to 150 pre-frail African American older adults in the area. The model will offer participants customized rehabilitative and lifestyle behavior change interventions before frailty develops, with the ultimate goal of establishing a new occupational therapy model within the primary care system. This award is part of the Michigan Health Endowment Fund’s larger Healthy Aging initiative for seniors.

USC Davis School Partners with King’s College London
The University of Southern California (USC) Leonard Davis School of Gerontology has signed a memorandum of understanding with King’s College London to encourage scholarly interaction, cultural interchange, cooperative research, and other forms of academic collaboration, including possible student and staff exchanges between the school and the Ageing Research program at King’s (ARK). The ARK program is a multidisciplinary consortium of investigators that brings together scholars and researchers in several complementary areas. It includes eight faculties at King’s College and its Francis Crick Institute, a joint venture with University College London and Imperial College London. Among its official international partners, ARK now lists the National University of Singapore; the Technical University of Dresden; the Karolinska Institute and Stockholm University; Keio University; Singapore Agency for Science, Technology and Research; Freie Universität Berlin; Charité Universitätsmedizin; Deutsche Institut für Ernährungsforschung; Harvard University and Harvard Medical School; and the USC Leonard Davis School.
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ABSTRACT SUBMISSIONS OPEN DECEMBER 15, 2017

OPENING KEYNOTE SPEAKER

DR. HENRY LOUIS GATES, JR.
Emmy Award Winning Filmmaker, Cultural Critic & Journalist

Henry Louis Gates, Jr. is the Alphonse Fletcher University Professor and Director of the Hutchins Center for African and African American Research at Harvard University. Emmy Award-winning filmmaker, literary scholar, journalist, cultural critic and institution builder, Professor Gates has authored seventeen books and created fourteen documentary films. Host of the popular show “Finding Your Roots,” Professor Gates is one of the United States’ most influential cultural critics and is both an eloquent commentator and formidable intellectual force on multicultural and African American issues.
NIA Readies Numerous Alzheimer’s-Related Grants

In December 2017, the National Institute on Aging (NIA) issued several funding opportunity announcements (FOA) for research on Alzheimer’s Disease (AD). They are listed below in order of deadlines.

**Sleep Disorders and Circadian Clock Disruption in Alzheimer’s Disease and Other Dementias of Aging** is aimed at molecular, cellular, genetic, epigenetic, and systems biology approaches to advance basic and clinical research on the causes and consequences of sleep deficiency and circadian clock dysfunction in AD, and the roles of sleep and the circadian clock as modifiers of the progression of neurodegeneration. Letters of intent are due February 23, and first applications are due March 26. To access the full announcement, see bit.ly/2kycgYX.

**Exosomes: From Biogenesis and Secretion to the Early Pathogenesis of Alzheimer’s Disease** invites innovative research focused on understanding the role of exosome biogenesis and secretion in modulating and propagation of early pathogenesis in sporadic and late-onset AD. Letters of intent are due February 23, and applications are due March 26. Visit bit.ly/2kwTtwZX for further details.

**From Association to Function in the AD Post-Genomics Era** was issued to solicit innovative and collaborative research focused on understanding the structure and function of proteins or protein complexes regulated by different AD genetic variants that have been identified to be associated with the sporadic and late onset AD. Letters of intent are due February 26, and applications are due March 28. Full details can be found at bit.ly/2j4ytgN.

**Interdisciplinary Research to Understand the Complex Biology of Resilience to Alzheimer’s Disease Risk** invites comprehensive, cross-disciplinary studies aimed at building predictive molecular models of cognitive resilience based on high-dimensional molecular data collected in individuals who remain free of dementia despite being at high risk for AD. Applications are due March 26. The full FOA can be found at bit.ly/2yF1o0e.

**Pragmatic Trials of Managing Multimorbidity in Alzheimer’s Disease** invites applications proposing to conduct research involving pragmatic clinical trials into improving the effectiveness of treatment strategies for comorbid conditions that occur frequently in combination with AD and related dementia (ADRD). Applications are due March 26. Review the FOA at bit.ly/2ABkdlDn.
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Visit www.geron.org/fellows for details.