Join a GSA Interest Group
Did you know GSA has more than 45 interest groups covering a range of topics? They are a great way for members to connect with others who share their interests. They also help members stay informed about topics outside their areas of expertise. Each GSA interest group has its own GSA Connect Community to share information and resources. Visit geron.org/interestgroups to learn more.

Share Your Professional Achievements!
Gerontology News proudly includes updates about members’ career accomplishments on page 3 each month. The majority of these items are submitted by members themselves, and the editors invite you to send in news about new jobs, promotions, appointments, board memberships, fellowships, awards, media appearances/mentions, books, and more. These items can be e-mailed to news@geron.org.

Austin Registration Opens; Unique Programming Planned

GSA is now accepting registrations for the 2019 Annual Scientific Meeting, scheduled from November 13 to 17 in Austin, Texas. Discounted pricing is available until September 12.

All meeting sessions will take place at the Austin Convention Center and JW Marriott Austin. GSA has secured special conference rates at the Marriott and four other hotels. (These rates are available until October 18, but the room blocks are likely to sell out before then.)

Abstract acceptance notifications will be sent on July 12. From July 15 through September 12, GSA will also welcome submissions for the Late Breaker Poster Sessions.

Visit www.geron.org/2019 to register, book a hotel room, and learn more about the program. GSA’s Austin attendees can also expect to find special sessions and events unique to this year’s meeting. Among them:

• President’s Opening Plenary Session: GSA will welcome social scientist and physician Nicholas A. Christakis, MD, PhD, MPH, as keynote speaker. He currently is the co-director of the Yale Institute for Network Science. Using experiments involving many thousands of people in online networks, in developing world villages, and in for-profit firms, his group has demonstrated how social connections shape our health, wealth, productivity, and security.

• Professional Workshops: In addition to a strong lineup of pre-conference workshops, several workshops are slated throughout the rest of the meeting. One of them, “Forming Academic-Industry Research Collaborations: Training for Early-Career Researchers,”

Statements and bios continued on page 13

Fellowships Will Enhance Reporters’ Aging Coverage

The GSA Journalists in Aging Fellows Program has received renewed grant support to welcome its 10th cohort of reporters. The 2019 funders include The Silver Century Foundation, The Retirement Research Foundation, The Commonwealth Fund, and The John A. Hartford Foundation.

Since its founding in 2010, this program has been responsible for nearly 700 news stories produced by 156 alumni. It has two goals: to educate journalists about issues in aging, better allowing them to spread a new awareness both to ethnic and general-audience populations; and to disseminate information about new scientific findings, policy debates, innovations, and evidence-based solutions.

“With the support of our funding partners, the program allows journalists to make invaluable connections to expert sources on aging, to each other, and to their communities,” said Todd Kluss, MA, GSA’s director of communications. “GSA is proud to celebrate 10 years of fostering these connections, which are a key component of improving our lives as we age.”

Kluss co-directs the Journalists in Aging Fellows Program together with Paul Kleyman, the founder and national coordinator of the program’s media partner, the Journalists Network on Generations.

“Our journalism fellows have generated a remarkable range of stories on topics such as combatting older adults’ hunger, reentry of older prisoners, and taboo subjects like dementia in many communities needing to know there’s help for families if only they will put aside their fears and seek it,” Kleyman said. “This program enables reporters to learn about the complex issues of aging and meet the expert sources who can inform their audiences.”

Continued on page 14
Is Ageism the “Secondhand Smoke” of Healthy Aging?

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

It’s now been 50 years since the word “ageism” entered the English lexicon, coined by the National Institute on Aging founding Director Robert N. Butler, MD, FGSA. Ageism and its impact continue to be studied, and have been the subject of a lot of peer-reviewed publications. But one need only look at some of the emerging dialogue around next year’s U.S. presidential contenders to see that ageism in America is well-entrenched and pervasive.

Many GSA members have contributed to the literature on the effects of ageism. A great example is the work of Becca Levy, PhD, FGSA, at Yale University. She’s a renowned expert on how age stereotypes, which are assimilated from the culture, impact the health of older individuals. Aging stereotypes are known to adversely influence the attitudes, cognition, and behavior of older individuals. It has been suggested that ageism is a risk factor for chronic disease. Studies have also shown that one’s own attitude toward aging can affect health outcomes too.

The good news is that individuals with more positive age beliefs seem to do better as they age. Such beliefs even seem to protect against dementia. It’s heartening to know that these beliefs, something we can cultivate on our own, can help us as we age. However, it’s rather disheartening to acknowledge that other peoples’ ageist attitudes, something we don’t control, can have a comparable negative impact on us.

As I’ve reflected on the far-reaching negative consequences of ageism, I was reminded of a somewhat analogous situation that we’ve dealt with as a society.

Think back to how people’s attitudes toward smoking have evolved over the years. Tobacco’s negative effect on smokers was acknowledged but it took society much longer to be proactive about protecting innocent bystanders from the dangers of secondhand smoke. In many ways, it seems that ageism is the secondhand smoke of healthy aging. What can we do to make sure everyone is aware that their ageist words and actions can impact the health of others, including loved ones?

Thankfully, we are seeing new movements to confront ageism. Leading up to its “Decade of Healthy Aging” from 2020 to 2030, the World Health Organization has launched a global campaign against ageism, reporting its findings to the United Nations. I recently represented GSA at the International Association of Gerontology and Geriatrics (IAGG) European Region Congress, and ageism was an important part of the dialogue there, too.

I’m proud of what GSA is doing to take on ageism as part of the Reframing Aging Initiative, which is designed to improve the public’s understanding of what aging means and the many ways that older people contribute to our society. The FrameWorks Institute, the social science research firm that conducted the research that launched this initiative, has continued its work in this area.

Last summer, FrameWorks scholars published a study in The Journals of Gerontology, Series B showing that implicit bias — which affects attitudes and behaviors toward older adults in discriminatory ways — can in fact be reduced by carefully framed messages. This means that by reframing the way we talk about aging, we can all be part of the solution to addressing ageism in America. And as I’ve said in this column before, it’s up to us in the field of gerontology to lead by example.

GSA recently established a web presence for the Reframing Aging Initiative at www.geron.org/ reframingaging, where you can view all the tools and resources developed to date.

At the IAGG meeting, one of the speakers reminded us of the quote “ageism is a prejudice against our future selves.” As the experts on aging, I urge GSA members to think about steps you can take in your personal and professional lives to make confronting ageism a daily habit.

James
Members in the News

• American Public Media’s “Marketplace Morning Report” aired a six-part series titled “Brains and Losses” in May and June on the financial vulnerability of older adults, which included quotes from Mark Lachs, MD, Marguerite “Marti” DeLiema, PhD, and Peter Lichtenberg, PhD, FGSA.

• Former GSA President Leonard Hayflick, PhD, FGSA, was mentioned in a May 26 Forbes article titled “Human-Made: Technologies Of The Body.”

• On June 4, former GSA President John W. Rowe, MD, FGSA, was quoted in a Reuters article titled “Immigrants play big role in caring for elderly and disabled in U.S.”

• GSA President-Elect Kathryn Hyer, PhD, FGSA, was interviewed on Tampa Bay’s Fox 13 News on June 5 for a story titled “6 Bay Area facilities on leaked list of troubled nursing homes.”

• Jacqueline Angel, PhD, FGSA, and Fernando Torres-Gil, PhD, FGSA, were quoted in a June 11 NBC News story titled “Latina longevity is real, but it can bring health, financial challenges.”

• GSA Biological Sciences Section Chair Matt R. Kaeberlein, PhD, FGSA, was quoted on June 11 in an article appearing on Fivethirtyeight.com titled “Can You Unwrinkle A Raisin?”

Colleague Connection

This month’s $25 amazon.com gift certificate winner:

Joshua Chodosh, MD

The recipient, who became eligible after referring new member Jeannette Beasley, PhD, 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:

Lisa A. Juckett, MOT, OTR/L, CHT

Click on the Member Spotlight slider image at the top of www.geron.org to read the interview and ask questions.

Coughlin Provides Testimony on Technology in Senate Hearing

Joseph Coughlin, PhD, FGSA, testified before the U.S. Senate Special Committee on Aging on May 22 at a hearing titled “Aging and Disability in the 21st Century: How Technology Can Help Maintain Health and Quality of Life.” As director of the MIT AgeLab in Cambridge, Massachusetts, Coughlin discussed the challenges and promises of technology-enabled innovation to improve the lives of older people and their families. He highlighted the importance of designing technology with the user in mind to increase the likelihood that devices are useful and to reduce stigma. He also discussed the need to ensure that these technologies are affordable, accessible to people in rural areas, and made available widely as part of a new longevity economy that supports aging.

Kheirbek Takes New Post at University of Maryland

Raya Elfadel Kheirbek, MD, MPH, FACP, has been appointed as professor of medicine and chief of the newly created Division of Palliative Medicine at the University of Maryland School of Medicine. Leading a multidisciplinary team of physicians, nurses, a pharmacist, social worker, and a pastoral care expert, Kheirbek’s group will primarily focus on symptom management and treatment of pain as well as the physical, psychosocial, and spiritual complexities associated with serious and life-threatening illnesses.

Whitelaw Honored at NCOA Conference

At the National Council on Aging (NCOA) Age+Action Conference in June, former GSA President Nancy Whitelaw, PhD, FGSA, received a 2019 NCOA Distinguished Service Award. This distinction recognizes NCOA employees and volunteers who have made major contributions to NCOA’s mission and social impact. Whitelaw was formerly NCOA’s senior vice president for health and founding director of NCOA’s Center for Healthy Aging, where she led a national movement to foster adoption of evidence-based programming by community agencies. NCOA honored Whitelaw for improving the health and well-being of older adults by fostering broad-based collaborations among practitioners, academics, and policymakers across health care, public health, and community services.

Hodes, Bernard, Szanton Speak at FoNIA Briefing

On June 27, the Friends of the National Institute on Aging (FoNIA) presented a Capitol Hill briefing titled “The Science of Aging: Groundbreaking Research Supported by the National Institute on Aging (NIA).” The speakers included NIA Director Richard Hodes, MD; NIA Deputy Director Marie A. Bernard, MD, FGSA, FAGHE; and Sarah L. Szanton, PhD, ANP, FAAN, FGSA, who serves as director of the Center on Innovative Care in Aging at the Johns Hopkins School of Nursing. FoNIA, of which GSA is a founding member, is a broad-based coalition of aging, disease and research organizations, and academic institutions, supporting the mission of the NIA.

GSAConnect Corner

Below are highlights from recent discussions on the GSA Connect online networking platform. Join the conversation at connect.geron.org!

• Kimberly A. Van Orden, PhD: Just a quick update regarding a collaborative effort by some members of our group: our manuscript on safety planning for suicidal older adults was recently accepted for publication in the special issue on Late-Life Suicide in the journal Clinical Gerontologist. The manuscript has been posted in our interest group library for review. (Posted in the Mental Health Practice and Aging Interest Group Community.)

• Molly French, MS: The Alzheimer’s Association and the Centers for Disease Control and Prevention (CDC) just released the Healthy Brain Initiative’s (HBI) Road Map for Indian Country to guide American Indian and Alaska Native (AI/AN) community leaders as they develop a broad response to Alzheimer’s and other dementias. The Road Map for Indian Country offers tribal leaders suggestions to engage community members along with strategies that can be tailored to their communities’ traditional wellness practices and other unique strengths. (Posted in the Open Forum Community.)
GSA Members Becoming Experts on Testifying — an Article Reprise

Almost three years ago I wrote a column, “Using Testimony to Present Your Findings or Tell Your Story,” to highlight the wonderful day when Amy Berman, BS, RN, testified before the U.S. Senate Special Committee on Aging. Well, since then, GSA has had many of its members testify before Congress, state legislatures, and regulatory bodies, and as experts on panels at national and international conferences. They could provide their own tutorials on testifying.

But, this month I decided to do a reprise of the testimony article with the hope that it may inspire more members to think about your work’s policy implications, frame your work for policy makers, and do the necessary outreach to put yourself in the position to be considered as a witness. It may also provide some insights and tips that we can all use to do a great job once we are summoned to the hallowed halls of Congress or elsewhere to testify or present. So, here is the slightly abbreviated story:

Recently a dear friend and colleague both to me and to GSA had the opportunity to testify before the U.S. Senate Special Committee on Aging. The chances of being invited before a congressional committee are slim; all the elements of politics, process, and policy must be in alignment. The timing must be right and you need to be well-respected and able to jump through some hurdles to prove your abilities.

So, I thought I would write about Amy Berman’s testimony story to remind myself and all of you of some of the key elements that lead up to that five-plus minutes one is given as a witness to tell one’s story or present findings from years of work.

If you know Amy, a GSA member who serves as a senior program officer at the John A. Hartford Foundation, you know that it is difficult to sound objective when describing her intellect, knowledge, compassion, and strength. So please indulge me — she is the perfect witness! And I should say upfront that Amy earned the opportunity, in part, the hardest way, by having to experience personally the good and bad of the health care system after being diagnosed with stage 4 breast cancer.

A little background on the types of hearings may be a good place to start.

No matter how “do nothing” or “activist” Congress is, there are hundreds of hearings taking place each year. There are various reasons to hold hearings and some of the most famous have been investigative in nature: Watergate, Iran Contra, the Benghazi attacks, and the infamous House Un-American Activities hearings on communism. Many involve a famous or high profile witness designed to draw attention to and raise support for an issue. In some cases, such as with actor Michael J. Fox and Parkinson’s disease, funding or efforts to address an issue have been significantly increased as a result.

Many hearings are simply fulfilling the congressional oversight function. Congress passes laws creating programs and it has the responsibility to evaluate them and see that they are implemented properly. Some hearings are driven by crises or everyday problems. Many of these hearings, although somewhat scripted, are designed to lay out problems and explore solutions; they educate both the public and the members of the committee. Keep in mind that the majority party has control over the committees and usually chooses the hearing topics and most of the witnesses. The Special Committee on Aging has a history of being more bipartisan. Most hearings are public, many can be seen live on TV or viewed later, and one can usually find the written testimony of the witnesses on the committee’s website.

The committee’s hearing, titled “The Right Care at the Right Time: Ensuring Person-Centered Care for Individuals with Serious Illness,” was looking at personal health care experiences, best practices, and challenges faced by health care providers. It also played a role in the politics and process of the Senate, and had some “star power” with best-selling author Atul Gawande, MD, at the witness table with Amy (our own star).

Knowing when you have something or someone special is important.

We all have high regard for the work and research we do (otherwise why do it), but not everything we do is relevant enough to the work of Congress to bring it forward as testimony. So, it is a special opportunity when one is asked to testify. When I heard Amy speak to the Campaign to End Unwanted Medical Treatment (a coalition that I coordinate), I knew that she and her story were compelling, that she is credible, and that her demeanor would make her a model witness. That was in April of 2015, and it took more than a year to secure an opportunity for her to share her experiences with a congressional audience.

Not every situation will be so obvious. When you believe that you have groundbreaking research, data, information, a report or a story that Congress or your state legislature or an executive branch agency should see, reach out and communicate with them. Hopefully they will know how to most effectively use the information, whether in a hearing, in developing ways to address a problem, or in helping to create awareness about the issue. Remember that even if you are not chosen to testify, you often have the opportunity to submit written testimony for the public record.

Persistence seems to be a critical factor in Washington these days.

Having a great witness with a compelling story is not enough; you need an opportunity. The work that went into securing a spot on the panel at the aging committee actually went back well before
Amy spoke to the campaign, and included drafting compromise language for a bill, helping a disgruntled senator, a compromise to hold a hearing, and an opportunity to speak directly with a committee chair. Almost a year later, after following up with her staff, the minority staff and others, the hearing took place.

Relationships with Members and staff can be very important.

Having an opportunity to speak to a member of Congress directly can be important. They are extremely busy, but that personal relationship or just a few minutes in a social setting back in the state or district can be very helpful for them to understand your issue or idea. Likewise, staff is critically important to the process. They make the recommendations to their members regarding who should testify at hearings. They have ideas about what they want out of the hearing and how they want it to be perceived by the public and the cameras and the legislators.

You may be able to help staff develop their ideas for a quality hearing that moves the issue forward and creates a positive impression of their member. Try to put yourself in their shoes and think about how your issue fits into their perspective and their policy and political needs.

Remember also that bipartisan is good. We made the case for Amy to both the majority and minority committee staff and to the personal staff.

Here are a few tips on being a witness that Amy did not need but that I try to remember:

- Be credible, concise, consistent, and compelling, and be respectful.
- Use additional statistics or examples to beef up the longer written testimony.
- Cut your oral presentation down to the most salient and memorable points.
- Have a list of additional points ready to work into your answers to any questions that the committee members may ask.
- Bring extra copies of your testimony to share with the audience.
- Don’t be afraid to say “I don’t know; I’ll have to get back to you with that information.”
- Try to give the members eye contact frequently; feel free to look down at the statement, but don’t read it word for word.
- Practice, practice, practice — with a timer.

Another tip: know your audience. Amy came to the hearing with knowledge of the bills on unwanted medical treatment, end of life, and advanced illness care that have been introduced in Congress. She knew who on the aging committee sponsored or co-sponsored them, and other issue areas the members care about. Know if committee members have personal experiences that they have shared in the past related to the issue and whether there are programs back in the state or district that are well known or could serve as a best practice examples. Are there problems back home that have stimulated the hearing idea? Of course, it is also good to do a bit of homework on the other witnesses and what they may be saying that either supports or opposes your approach.

Shoot for jargon-free testimony by minimizing research, medical, or technical terms. It can be beneficial to use descriptive, interesting, and colorful words to paint a picture about the people and issues involved. Amy effectively used an analogy about what she wants from the life she has ahead of her and called it the “Niagara Falls trajectory.” She would like to live as long as possible with a steadily high quality of life and then go over the falls quickly instead of having a sharp steady downward trajectory as the result of opting for extremely aggressive treatments that would hurt her quality of life.

If you have something that you would like the committee or the members to do, remember to ask. If you are there simply to educate and enlighten the committee, that is fine, but if you have a specific bill or proposal you’d like to support, this is a great time to explain why you would like them to support it too.

If you are social media savvy, as Amy is, consider tweeting, doing a blog post or sending out a press release to get the word out about the hearing, your testimony, and the issues.

If you would like to see Amy’s testimony, please go to hearings on the Senate Special Committee on Aging website at www.aging.senate.gov/hearings. If you would like to view on YouTube a webinar that former Benjamin Rose Institute President and CEO [and now GSA visiting executive] Richard Browdie and I conducted on testifying, go to www.youtube.com/watch?v=QKUqQHzut9g. Good luck and let me know if I may be of assistance!

Recent GSA Policy Actions

GSA co-sponsored a Friends of the National Institute on Aging educational briefing on Capitol Hill on June 27. The speakers included NIA Director Richard Hodes, MD; NIA Deputy Director Marie A. Bernard, MD, FGSA, FAGHE; and Sarah L. Szanton, PhD, ANP, FAAN, FGSA, who serves as director of the Center on Innovative Care in Aging at the Johns Hopkins School of Nursing. Szanton talked about her research on a program called CAPABLE, which combines handyman services with nursing and occupational therapy to improve mobility, reduce disability, and decrease healthcare costs.

GSA submitted comments to the U.S. Senate Committee on Health, Education, Labor and Pensions regarding amendments to the Modernization of the Older Americans Act. The amendments include support for innovation, demonstration, and evaluation in aging programs in the legislation. GSA commented that as a multidisciplinary professional membership society whose purpose is to advance the scientific and scholarly study of aging and to promote human welfare by the encouragement of gerontology in all its areas, it supports the efforts to evaluate program outcomes while enhancing the quality of life, independence, and well-being of program participants. GSA coordinated the submission of its comments alongside the National Council on Aging, National Area Agencies on Aging, and the National Association of States United for Aging and Disabilities on this section of the draft reauthorization.
Is Your Dissertation Getting You Down?
Can’t Quite Get Started? Or can’t quite finish?
Need feedback along the way?

JOIN AN EXCLUSIVE GSA WRITING GROUP

GSA PEER LED DISSEPTION WRITING GROUP

Join an exclusive GSA ESPO members-only peer-led dissertation writing group for a supportive environment to exchange critical feedback, push past procrastination, and stay accountable to your goals.

Group participants will:

- Create a writing schedule with measurable goals.
- Report on goals at each session.
- Provide your writing for review.
- Contribute feedback on group members’ writing.
- Share resources and ideas.
- Troubleshoot challenges.

Each small group (4 to 8 members) will meet via Skype every other week for an hour to an hour and a half. Meeting day and time of each group will be provided once all applicant availability has been reviewed. Semester-long commitment required.

For more information or to sign up, go to www.geron.org/dwg.

Free for GSA ESPO Members.
Questions? Email espo@geron.org.
While early education through high school teachers receive a four-year degree and oftentimes are required to obtain a master’s in education, most PhD students who will go on to teach university students may only receive one or two courses in teaching. In the past, this has been associated with poor teaching outcomes. However, with new technological advances and individual initiative, even with little educational training, ESPO members can teach effectively.

The Two Paradigms
An infinite number of formats exist that a professor can shape his or her course, but typically one of two paradigms are seen within a classroom:

- The Sage on the Stage: This paradigm is the classic format of a wise professor with or without PowerPoint slides speaking in front of a class full of college students as they furiously write notes. Students are to read the book for homework and typically have multiple choice tests.
- The Guide on the Side: This format typically sees the professor playing the role as a coach. During instructional time students are completing projects and at home they are watching lectures, reviewing PowerPoints, and reading the book. Sometimes, it can include an entirely flipped classroom.

There has been a negative connotation attributed to the sage on a stage paradigm while the guide on the side has been viewed in a positive light. The sage on a stage has been afflicted with problems because students have an increasingly shorter attention span and not all students have the same rate of learning as their peers. Additionally, another argument is that in the days of the digital age college students have all the information at their fingertips. Instead, they need to be taught how to sift, research, and critique such information.

However, there are dangers in the guide on the side paradigm as well. Some students have reported that the guide often turns into a “ghost.” Students have described this ghost phenomenon as professors begin the course, whether online or in-person, and then seem to disappear. Another danger is the disengaged student, or the unmotivated, that will often slip through the cracks. To prevent both of these dangers in the guide on the side paradigm, frequently check in with students, both individually and in their groups, keep an eye on the overall grades, and at the beginning of the semester set clear course standards and do not waiver from them.

In an ideal world, students and professors would be able to communicate perfectly and the knowledge that professors needed to disseminate would go forth and stay in students’ brains for as long as it was needed no matter the teaching style. But, both qualitative and quantitative research from students and teachers alike shows that the guide on the side has better student outcomes despite the potential dangers.

If you are interested in learning more about the guide on the side, I suggest reading the “5 Best Practices for the Flipped Classroom” by Andrew Miller and other articles on Edutopia’s website (https://www.edutopia.org/blog/flipped-classroom-best-practices-andrew-miller).

Starting Small
So, how can we, the current members of the Emerging Scholar and Professional Organization, start small? The following options are some suggestions that would take five to ten minutes of class time:

- Think-pair-share: Pose a question to the class to think about, then have each student turn to a classmate to discuss their answers, then choose a finite number of pairs to share their thoughts.

- Flowcharting: Post large piece of paper up around your classroom for groups of students to sketch a flowchart of how a process works. (Modification: Have students complete it in their notes or on a paper to turn in for credit.)

- Concept mapping: Give students a principle to grapple with relationships to other concepts. When the group has finished discussing how they are related, they must complete their concept map.

- Developing critiques: Describe a research example or common practice in class and have students develop critiques that are well-thought out.

Do you have a flipped classroom of over 150 students? Respond at kklotz@bgsu.edu with the subject line: Teaching Effectively.
GSA Honors Outstanding Individuals

Please join us in congratulating our 2019 awardees!

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

The awardees will be recognized at this year’s GSA Annual Scientific Meeting, taking place November 13 to 17 in Austin, Texas. Check the final meeting program for all dates, times, and room location assignments for award events.

SOCIETY-WIDE AWARDS

**Maxwell A. Pollack Award**
Presented to Karen Lincoln, PhD, FGSA
University of Southern California

**Robert W. Kleemeier Award**
Presented to Steven Zarit, PhD, FGSA
Penn State University

**Donald P. Kent Award**
Presented to Terry Fulmer, PhD, RN, FAAN, FGSA
The John A. Hartford Foundation

**M. Powell Lawton Award**
Presented to Barbara Resnick, PhD, CRNP, FGSA
University of Maryland

**Doris Schwartz Gerontological Nursing Research Award**
Presented to Keela Ann Herr, PhD, RN, AGSF FGSA, FAAN
University of Iowa

**Margret M. and Paul B. Baltes Foundation Award in Behavioral and Social Gerontology**
Presented to Allison A. M. Bielak, PhD, FGSA
Colorado State University
<table>
<thead>
<tr>
<th>Award</th>
<th>Recipient</th>
<th>Institution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clark Tibbitts Award</td>
<td>David C. Burdick, PhD, FAGHE, FGSA</td>
<td>Stockton University</td>
</tr>
<tr>
<td>Hiram J. Friedsam Mentorship Award</td>
<td>Bradley J. Fisher, PhD, FAGHE</td>
<td>Missouri State University</td>
</tr>
<tr>
<td>Distinguished Faculty Award</td>
<td>Gayle Doll, PhD, FAGHE, FGSA</td>
<td>Kansas State University</td>
</tr>
<tr>
<td>Rising Star Early Career Faculty Award</td>
<td>Katarina Felsted, PhD</td>
<td>University of Utah</td>
</tr>
<tr>
<td>Part-Time/Adjunct Faculty Honor</td>
<td>Vincent Bisson, MA</td>
<td>Lasell College</td>
</tr>
<tr>
<td>Part-Time/Adjunct Faculty Honor</td>
<td>Georgene R. Nitzsche, MS, CPG, CAF</td>
<td>University of Indianapolis</td>
</tr>
<tr>
<td>Student Leadership Award</td>
<td>Stephanie Bolton, BS</td>
<td>University of Southern California</td>
</tr>
<tr>
<td>David Peterson Award</td>
<td>Sara M. Bradley, MD, FACP</td>
<td>Northwestern Feinberg School of Medicine</td>
</tr>
<tr>
<td>David Peterson Award</td>
<td>Reena Karani, MD, MHPE</td>
<td>Icahn School of Medicine at Mount Sinai</td>
</tr>
<tr>
<td>David Peterson Award</td>
<td>Linda Pang, MD</td>
<td>University of Texas MD Anderson Cancer Center</td>
</tr>
</tbody>
</table>
2019 awardees

BEHAVIORAL AND SOCIAL SCIENCES

Distinguished Career Contribution to Gerontology Award
Presented to Christopher Hertzog, PhD, FGSA
Georgia Institute of Technology

Distinguished Mentorship in Gerontology Award
Presented to Jacqui Smith, PhD, FGSA
University of Michigan

Richard M. Kalish Innovative Publication Award (Article)
Presented to Kira Birditt, PhD, FGSA
University of Michigan

Richard M. Kalish Innovative Publication Award (Article)
Presented to James A. Cranford, PhD
University of Michigan

Richard M. Kalish Innovative Publication Award (Article)
Presented to Nicky J. Newton, PhD
University of Michigan

Richard M. Kalish Innovative Publication Award (Article)
Presented to Lindsay H. Ryan, PhD
University of Michigan

Richard M. Kalish Innovative Publication Award (Book)
Presented to Sara J. Czaja, PhD, FGSA
Weill Cornell Medicine

Richard M. Kalish Innovative Publication Award (Book)
Presented to Walter R. Boot, PhD, FGSA
Florida State University

Richard M. Kalish Innovative Publication Award (Book)
Presented to Neil Charness, PhD, FGSA
Florida State University

Richard M. Kalish Innovative Publication Award (Book)
Presented to Wendy A. Rogers, PhD, FGSA
University of Illinois at Urbana-Champaign
Please check the final meeting program for all dates, times, and room location assignments for award events.

2019 awardees

HEALTH SCIENCES

Joseph T. Freeman Award
Presented to Anne B. Newman, MD, MPH, FGSA
University of Pittsburgh

Excellence in Rehabilitation of Aging Persons Award
Presented to Neil B. Alexander, MD
University of Michigan

SOCIAL RESEARCH, POLICY & PRACTICE

Elaine M. Brody Thought Leader Award
Presented to Kathleen H. Wilber, PhD, FAGHE, FGSA
University of Southern California

Carroll L. Estes Rising Star Award
Presented to Clara Berridge, PhD, MSW
University of Washington

SPECIAL ADDITIONAL AWARD

Minority Issues in Gerontology Outstanding Mentorship Award
Presented to Tamara A. Baker, PhD, FGSA
University of Kansas

If you are interested in learning more about GSA awards, visit www.geron.org/membership/awards.

GSA thanks the following award sponsors:

The New York Community Trust (Pollack Award)
Abramson Senior Care’s Polisher Research Institute (Lawton Award)
Margret M. & Paul B. Baltes Foundation (Baltes Award)

Additionally, the following will be given at the Annual Scientific Meeting:

Academy for Gerontology in Higher Education
Graduate Student Paper Award
James McKenney Student Travel Award
Mildred M. Seltzer Distinguished Service Honor

Behavioral & Social Sciences Section
Student Research Award: Dissertation Level
Student Research Award: Pre-Dissertation Level

Biological Sciences Section
George Sacher Student Award
Minority Investigator Travel Awards

Health Sciences Section
Austin Bloch Post-Doctoral Fellow Award
Person-In-Training Award
Research Award

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

Emerging Scholar and Professional Organization
Interdisciplinary Paper Award
Poster Award (five)
Douglas Holmes Emerging Scholar Paper Award
Minority Issues in Gerontology Committee Student Poster Award
Distinguished Members Granted Fellow Status

GSA’s Executive Committee has approved the following 43 individuals for fellow status within the Society. In addition to being honored during the Fellows and International Reception (Thursday, November 14, 6:30 p.m.) at the Annual Scientific Meeting, they will be presented with fellow certificates and pins at their respective section business meetings and award presentations.

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

**Academy for Gerontology in Higher Education**
Elizabeth J. Bergman, PhD, FAGHE, Ithaca College Gerontology Institute; Lyn M. Holley, PhD, MPA, FAGHE, University of Nebraska at Omaha; Joann M. Montepare, PhD, FAGHE, FGSA, Lasell College

**Behavioral and Social Sciences Section**
Marja J. Aartsen, PhD, FGSA, Oslo Metropolitan University — NOVA Norwegian Social Research; Keith A. Anderson, PhD, MSW, FGSA, University of Montana; Julie Blaskewicz Boron, MS, PhD, FGSA, University of Nebraska, Omaha; Michelle Suzanne Bourgeois, PhD, CCC-SLP, FGSA, University of South Florida; Maria T. Brown, PhD, LMSW, FGSA, Syracuse University; Jinmyoung Cho, PhD, FGSA, Baylor Scott & White Health; Moon Choi, PhD, FGSA, KAIST; Zhen Cong, FGSA, University of Texas at Arlington; Kate de Medeiros, PhD, FGSA, University of Texas at Dallas; Heidi Harriman Ewen, PhD, FGSA, University of Georgia; Gyoung Hae Han, PhD, FGSA, Seoul National University; Klaus Hauer, PhD, FGSA, Heidelberg University Bethanien Hospital/Geriatric Center; Meeryoung Kim, MSSW, PhD, FGSA, Daegu University; Áine Ni Léime, BA, MA, PhD, FGSA, National University of Ireland; Martina Roes, PhD, FGSA, German Center for Neurodegenerative Diseases; Philip Edwin Taylor BSc, MSc, PhD, FGSA, Federation University Australia; Faika Zanjani PhD, FGSA, Virginia Commonwealth University; Gertrud Akke Rixt Zijlstra, PhD, FGSA, Maastricht University

**Biological Sciences Section**
Pinchas Cohen, MD, FGSA, University of Southern California; Viviana I. Perez, PhD, FGSA, Oregon State University; Blanka Rogina, PhD, MS, FGSA, University of Connecticut Health Center

**Health Sciences Section**
Carmen Castaneda-Sceppa, MD, PhD, FGSA, Northeastern University; Carolyn Clevenger, DNP, GNP-BC, FGSA, Emory University; Rose Ann DiMaria-Ghalili, PhD, RN, CNSC, FASPEN, FAAN, FGSA, Drexel University; Michael Harris-Love, DSc, MPT, FGSA, Rocky Mountain Regional VAMC/University of Colorado Anschutz Medical Campus; Alison Kris, PhD, RN, FGSA, Fairfield University; Melissa O’Connor, PhD, MBA, RN, FGSA, Villanova University M. Louise Fitzpatrick College of Nursing

**Social Research Policy and Practice**
Joy Swanson Ernst, PhD, MSW, FGSA, Wayne State University School of Social Work; Denise Gammonley, PhD, LCSW, FGSA, University of Central Florida; Faith Hopp, PhD, FGSA, Wayne State University; Anne K. Hughes, PhD, MSW, FGSA, Michigan State University; Amanda Lehning, MSW, PhD, FGSA, University of Maryland Baltimore; Katie Maslow, MSW, FGSA, The Gerontological Society of America; Christina Matz, MSW, PhD, FGSA, Boston College; Kathryn B. McGrew, MSW, PhD, FGSA, Miami University; Duy Nguyen, MSW, PhD, FGSA, Columbia University; Peter S. Reed, PhD, MPH, FGSA, University of Nevada, Reno School of Medicine Sanford Center for Aging; Miriam S. Rose, MEd, FGSA, Benjamin Rose Institute on Aging; Lindsay Brooke Schwartz, PhD, FGSA, American Health Care Association/National Center for Assisted Living; Nancy R. Zweibel, PhD, FGSA, The Retirement Research Foundation

To learn more about the nomination process and see a listing of all fellows, visit www.geron.org/membership/fellows.
AGEC Accredits First Gerontology Degree Programs Using AGHE Competencies

The Accreditation for Gerontology Education Council (AGEC) has accredited the University of Southern California Masters Degree Programs and the American River College Associate Degree Program, making them the first gerontology degree programs to receive AGEC accreditation. AGEC is currently reviewing two baccalaureate degree programs in gerontology.

AGEC uses the Academy for Gerontology in Higher Education (AGHE) Gerontology Competencies for Undergraduate and Graduate Education (2014) as a central component of the process of assessing student learning. Integrating the competencies into a program’s curriculum and measuring their acquisition are fundamental aspects of program evaluation, as envisioned when the AGHE competencies were initially developed.

Assessing the acquisition of competencies as part of the student learning standard and the other accreditation standards are specified in the AGEC Handbook that also contains guidelines for the accreditation process, timelines, writing the self-study, and organizing the site visit. The handbook provides information about how programs demonstrate that accreditation standards have been met/exceeded and specifies preparatory work that programs should undertake prior to applying for accreditation. It is found on AGEC’s website: www.geroaccred.org.

Higher education degree granting programs in gerontology, specifically associate, baccalaureate, and master’s degree programs, are eligible to apply to AGEC for accreditation. AGEC was officially formed in 2016. It collaborates with, but is independent from, The Gerontological Society of America and AGHE. It is directed by a Board of Governors consisting of nine members representing higher education gerontology programs and entities associated with the field of aging. The organizational structure also includes review teams, site visitors, and staff support.

A special task force under the sponsorship of the Academy for Gerontology in Higher Education developed AGEC’s initial organizational structure. With support from The Russell & Josephine Kott Memorial Charitable Trust, the task force and later the AGEC Board of Governors developed policies and procedures to guide the evaluation process, registered as an independent non-profit, and gained approval as a 501(c)(3) entity.

Please consult the AGEC website www.geroaccred.org for further information. Gerontology degree programs interested in seeking accreditation should contact the secretary of the Board of Governors, Donna Schafer, PhD, at donna_schafer@sbcglobal.net.

Continued from page 1 – Austin Registration Opens; Unique Programming Planned

requires an advance application by August 16. This is being run by the Stanford Center on Longevity and Duke Center for Interdisciplinary Decision Science with grant support from the National Institute on Aging. Other offerings include “Making Change: Building Leadership and Impact Through Effective Communications,” “International Workshop on Home Care Medicine,” and “Reframing Aging: America Needs an Aging Attitude Adjustment.”

• AGHE Activities: Following the full integration of the Academy for Gerontology in Higher Education (AGHE) as GSA’s educational organization early last year, the GSA meeting program will now incorporate events previously held at AGHE’s Annual Meeting and Educational Leadership Conference. Attendees in Austin can sign up for such activities as AGHE’s Teaching Institute, Breakfast and Awards Presentation, and a special offsite evening event celebration. Separate fees are required for these events.

• Momentum Discussions: Following a well-received launch at last year’s Annual Scientific Meeting, GSA will continue its Momentum Discussions series. Shifting from the traditional lecture format, Momentum Discussions will encourage attendees to actively participate in these sessions — each centered on a specific trend in the field of gerontology.

• Educational Site Visit: Austin’s Blanton Museum of Art will welcome GSA conference-goers on Thursday, November 14. The visit will focus on an exploration of the possibilities of illuminating late-life creativity and the longevity dividend through an interactive tour and discussion with expert curators and art educators. A separate fee is required for this event.

• The Dog Aging Project: On the evening of Thursday, November 14, GSA is holding a public event titled “Living in Dog Years: The Science of How Dogs Age and the Implications for Human Aging.” At this session, attendees will learn about how the Dog Aging Project, a citizen science program, was conceived and is being implemented, and how the results apply and may be translated to humans.

• Gerontologists Giving Back Service Event: On Friday, November 15, GSA is offering a volunteer opportunity with AGE of Central Texas’s Austin adult day center. With more than 50 years of combined experience among the full-time nursing and professional staff specializing in care of people with Alzheimer’s and memory loss, AGE provides respite to caregivers and socialization to older adults. GSA attendees will work alongside staff to engage members in cognitively and physically stimulating activities.
New Public Policy & Aging Report Focuses on the OAA

While the Older Americans Act (OAA) has established a national network of programs and services offering certain benefits to the nation’s older adults, policy makers are yet again deliberating about how to best expand and strengthen (and not just maintain) the aging network relative to the ever growing demand (and need) brought about by the increasing number of Americans age 60 and older.

As the latest efforts to reauthorize the OAA move forward, the editor-in-chief of Public Policy and Aging Report, Brian Kaskie, PhD, said he hopes the most recent issue, titled “Older Americans Act Reauthorization 2020: Aging Successfully or Aging in Place?” proves illuminating.

Besides showcasing a discrete selection of programs and services administered under the OAA (Lauren R. Bangerter, PhD, Meghan Fadel, MA, Catherine Riffin, PhD, and Michael Splaine, MA; James Firman, Howard Bedlin, Marci Phillips, and Josh Hodges; Michael J. Lepore, PhD, and Hannah Rochford, MPH), this issue features two articles (Jennifer N. Howard, Jessica M. Jones, and Edith G. Walsh, PhD; Suzanne Kunkel, PhD, FGSA) that highlight some intriguing administrative partnerships that have developed between the aging network and local health and community-based service systems.

Also, Pamela Nadash, PhD, BPhil, FGSA, takes a step back and compares America’s aging network with several other countries, and reminds us how critical our nation’s localities are in providing programs, services and protections to senior citizens. Perhaps most important, Joel Olah, PhD, and Donna K. Harvey, BA, as well as Robert B. Hudson, PhD, FGSA, offer their perspectives of the well-established history in which individuals who are well informed about the importance and value of the OAA have (almost) always managed to push political bipartisanship aside and come together on behalf of our nation’s seniors to reauthorize the OAA. To access this issue, visit academic.oup.com/ppar.

Innovation in Aging Planning Special Issue on Race, Mental Health

Innovation in Aging has issued a call for papers for a special issue on race and mental health among minority older adults, and is now accepting abstracts. The goal of this special issue is to increase the amount of quality research on the mental health of older Americans in racial and ethnic minority populations. The abstract should include the main findings that will be reported in the full manuscript while emphasizing the contribution of the study to research on the mental health of older adults in racial and ethnic minorities. Robert Joseph Taylor, MSW, PhD, at the University of Michigan, will be serving as the guest editor for this special issue. Abstracts are due by October 18, 2019. Open Access waivers will be available for all articles published in this special issue. Please review the full call for papers at bit.ly/GSA-CFPs.

The Gerontologist Expands Social Media Outreach with New Podcast

The Gerontologist has launched a new podcast series as part of the GSA on Aging Podcast Series. The Gerontologist series is supported by the GSA Innovation Fund, and focuses on recently published articles in the journal. Howard B. Degenholtz, PhD, FGSA, social media editor of the journal, interviews authors about their latest work and research findings and their contribution to the field.

“My goal is to make research that is published in The Gerontologist accessible and interesting to a wide audience,” said Degenholtz.

In the first episode, Degenholtz interviews Victoria Burns, PhD, at University of Calgary, to discuss her article on homelessness in later life and her documentary project, bringing to life the stories of homeless older adults in Calgary. In the next episode, he interviews Brian Kaskie, PhD, of the University of Iowa, about increasing cannabis use among older adults, then bringing a different perspective by sharing his conversation with his mother about the topic of cannabis use. The series is available on iTunes, Stitcher, Pocket Casts, and many other apps. To listen to the podcast and read the articles discussed in each of the episodes, visit geron.org/podcast.

Continued from page 1 – Fellowships Will Enhance Reporters’ Aging Coverage

As in previous years, half of the fellows will be selected from general audience media and half from ethnic media outlets that serve communities within the U.S.

The program commences with the fellows’ participation in GSA’s Annual Scientific Meeting, which in 2019 will take place from November 13 to 17 in Austin, Texas — with the theme of “Strength in Age: Harnessing the Power of Networks.” On arriving in Austin, the fellows will participate in a daylong workshop before the GSA meeting begins. This session will showcase research highlights from the meeting and host discussions with veteran journalists on how to position aging stories in the current media environment.

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

Several previous fellows also will be eligible for support to attend the GSA meeting to cover the newest developments in the field of aging. A continuously updated list of stories from the fellows is available at www.geron.org/journalistfellows.
impairment in older drivers. Specifically, applications should propose research on automobile technology for signaling early signs of cognitive opportunity announcement that invites applications to conduct new research on automobile technology for signaling early signs of cognitive impairment. Two general kinds of research are envisioned: basic, intended to identify unobtrusive technology for monitoring driving performance and integrating it with other data to assess an individual’s health and/or functional status to detect early signs of cognitive impairment; and methodological, intended to integrate driving-related data (and databases) with data on an individual’s health and functional status to detect cognitive impairment. Applications that seek to develop devices, tools, or invasive techniques are outside the scope of this announcement. The first standard application due date is October 5. More information can be obtained at bit.ly/2X0fntP.

ACL Releases New Profile of Older Americans
The Administration for Community Living (ACL) has issued the “2018 Profile of Older Americans,” an annual summary of critical statistics related to the older population in the United States. Relying primarily on data offered by the U.S. Census Bureau, the profile illustrates the shifting demographics of Americans age 65 and older. It includes key topic areas such as income, living arrangements, education, health, and caregiving. The 2018 profile also incorporates a new special section on emergency and disaster preparedness. To access the document, visit bit.ly/2MmdjMF.

NIA Funds Stated for Research on Driving, Cognitive Impairment Detection
The National Institute on Aging (NIA) has issued a funding opportunity announcement issued by the National Institute on Aging (NIA) is supporting applications for OAICs, which are centers of excellence in geriatrics research and research education. The OAIC awards are designed to develop or strengthen awardee institutions’ programs that focus on and sustain progress in a key area of aging research. Applicants should identify an area of focus in which progress could contribute to greater independence for substantial populations of older persons and offer opportunities for education in aging research. This area of focus should be a common theme around which all proposed OAIC activities are organized. To view additional detail and review areas of focus, visit bit.ly/2wSwaUQ. Applications are due October 2.

Federal Grants Will Support Research on Neurostimulation
The National Institute on Aging and the National Institute of Mental Health have issued a funding opportunity announcement to encourage applications for studies using non-invasive neurostimulation/neuromodulation in the treatment of Alzheimer’s disease (AD) or Alzheimer’s disease-related dementias (ADRD). The goal of this announcement is to establish initial efficacy of neurostimulation/neuromodulation in the treatment of AD/ADRD or to refine these interventions for AD/ADRD patients. Multimodal or combination interventions are allowed, provided the focus and innovative component is neurostimulation. Applications that seek to develop devices, tools, or invasive techniques are outside the scope of this announcement. The first standard application due date is October 22. Visit bit.ly/2IFRMdT for more information.

The Claude D. Pepper Older American Independence Centers (OAIC) program was established in honor of a late U.S. representative to establish centers of excellence in research and research education to increase scientific knowledge leading to better ways to maintain or restore independence in older persons. A new funding opportunity announcement issued by the National Institute on Aging (NIA) is designed to develop or strengthen awardee institutions’ programs that focus on and sustain progress in a key area of aging research. Applicants should identify an area of focus in which progress could contribute to greater independence for substantial populations of older persons and offer opportunities for education in aging research. This area of focus should be a common theme around which all proposed OAIC activities are organized. To view additional detail and review areas of focus, visit bit.ly/2wSwaUQ. Applications are due October 2.

Federal Grants Will Support Research on Neurostimulation
The National Institute on Aging and the National Institute of Mental Health have issued a funding opportunity announcement to encourage applications for studies using non-invasive neurostimulation/neuromodulation in the treatment of Alzheimer’s disease (AD) or Alzheimer’s disease-related dementias (ADRD). The goal of this announcement is to establish initial efficacy of neurostimulation/neuromodulation in the treatment of AD/ADRD or to refine these interventions for AD/ADRD patients. Multimodal or combination interventions are allowed, provided the focus and innovative component is neurostimulation. Applications that seek to develop devices, tools, or invasive techniques are outside the scope of this announcement. The first standard application due date is October 22. Visit bit.ly/2IFRMdT for more information.

The National Institute on Aging (NIA) has issued a funding opportunity announcement that invites applications to conduct new research on automobile technology for signaling early signs of cognitive impairment in older drivers. Specifically, applications should propose how to incorporate the critical knowledge of caregivers in developing pharmaceutical products, biologic therapies, diagnostics, and medical devices. The report also provides recommendations for leveraging caregivers’ enormous reservoir of information and observations about the conditions their care recipients experience and associated health outcomes. The report was developed with the clear recognition that people living with various health conditions along with their friends and family members are essential partners in the delivery of health care. Access the report at www.caregiving.org/innovation.

Report Examines Caregivers’ Role in Medical Product Development
The National Alliance for Caregiving, in partnership with the Leaders Engaged on Alzheimer’s Disease (LEAD) Coalition, has released “Paving the Path for Family-Centered Design: A National Report on Family Caregiver Roles in Medical Product Development,” which explores the vital roles that family caregivers can play in shaping biomedical research and development, regulatory decision-making and healthcare delivery. This first-of-its-kind report begins a dialogue on how to incorporate the critical knowledge of caregivers in developing pharmaceutical products, biologic therapies, diagnostics, and medical devices. The report also provides recommendations for leveraging caregivers’ enormous reservoir of information and observations about the conditions their care recipients experience and associated health outcomes. The report was developed with the clear recognition that people living with various health conditions along with their friends and family members are essential partners in the delivery of health care. Access the report at www.caregiving.org/innovation.

ACL Releases New Profile of Older Americans
The Administration for Community Living (ACL) has issued the “2018 Profile of Older Americans,” an annual summary of critical statistics related to the older population in the United States. Relying primarily on data offered by the U.S. Census Bureau, the profile illustrates the shifting demographics of Americans age 65 and older. It includes key topic areas such as income, living arrangements, education, health, and caregiving. The 2018 profile also incorporates a new special section on emergency and disaster preparedness. To access the document, visit bit.ly/2MmdjMF.

NIA Will Fund New Pepper Centers
The Claude D. Pepper Older American Independence Centers (OAIC) program was established in honor of a late U.S. representative to establish centers of excellence in research and research education to increase scientific knowledge leading to better ways to maintain or restore independence in older persons. A new funding opportunity announcement issued by the National Institute on Aging (NIA) is supporting applications for OAICs, which are centers of excellence in geriatrics research and research education. The OAIC awards are designed to develop or strengthen awardee institutions’ programs that focus on and sustain progress in a key area of aging research. Applicants should identify an area of focus in which progress could contribute to greater independence for substantial populations of older persons and offer opportunities for education in aging research. This area of focus should be a common theme around which all proposed OAIC activities are organized. To view additional detail and review areas of focus, visit bit.ly/2wSwaUQ. Applications are due October 2.

Federal Grants Will Support Research on Neurostimulation
The National Institute on Aging and the National Institute of Mental Health have issued a funding opportunity announcement to encourage applications for studies using non-invasive neurostimulation/neuromodulation in the treatment of Alzheimer’s disease (AD) or Alzheimer’s disease-related dementias (ADRD). The goal of this announcement is to establish initial efficacy of neurostimulation/neuromodulation in the treatment of AD/ADRD or to refine these interventions for AD/ADRD patients. Multimodal or combination interventions are allowed, provided the focus and innovative component is neurostimulation. Applications that seek to develop devices, tools, or invasive techniques are outside the scope of this announcement. The first standard application due date is October 22. Visit bit.ly/2IFRMdT for more information.

The National Institute on Aging (NIA) has issued a funding opportunity announcement that invites applications to conduct new research on automobile technology for signaling early signs of cognitive impairment in older drivers. Specifically, applications should propose how to incorporate the critical knowledge of caregivers in developing pharmaceutical products, biologic therapies, diagnostics, and medical devices. The report also provides recommendations for leveraging caregivers’ enormous reservoir of information and observations about the conditions their care recipients experience and associated health outcomes. The report was developed with the clear recognition that people living with various health conditions along with their friends and family members are essential partners in the delivery of health care. Access the report at www.caregiving.org/innovation.

Report Examines Pain Management in Context of Opioid Epidemic
The National Academies of Sciences, Engineering, and Medicine has released a proceedings report, “Pain Management for People with Serious Illness in the Context of the Opioid Use Disorder Epidemic — Proceedings of a Workshop.” This report chronicles presentations and discussions on the unintended consequences of the responses to the opioid use disorder epidemic for patients, families, communities, and clinicians. It also refers to potential policy opportunities to address these consequences. Access the report at bit.ly/2X4nH0w.

The National Institute on Aging and the National Institute of Mental Health have issued a funding opportunity announcement to encourage applications for studies using non-invasive neurostimulation/neuromodulation in the treatment of Alzheimer’s disease (AD) or Alzheimer’s disease-related dementias (ADRD). The goal of this announcement is to establish initial efficacy of neurostimulation/neuromodulation in the treatment of AD/ADRD or to refine these interventions for AD/ADRD patients. Multimodal or combination interventions are allowed, provided the focus and innovative component is neurostimulation. Applications that seek to develop devices, tools, or invasive techniques are outside the scope of this announcement. The first standard application due date is October 5. More information can be obtained at bit.ly/2X0fntP.
GSA 2019 ANNUAL SCIENTIFIC MEETING

Strength in Age: Harnessing the Power of Networks

NOVEMBER 13–17, 2019 | AUSTIN, TEXAS

What does the meeting theme, Strength in Age: Harnessing the Power of Networks, mean to you?

REGISTER NOW:
WWW.GERON.ORG/GSA2019