Gerontologists Tackle Social Isolation, Increasingly a Public Health Concern

Social connectivity and meaningful social engagement must be promoted as integral components of healthy aging, according to a new collection of articles in the latest issue of GSA’s Public Policy & Aging Report journal. Several authors also detail a series of initiatives that, if replicated, hold promise for decreasing isolation among older adults.

More than 8 million people over age 50 are socially isolated. That means they may not have the support of a social network of friends, family, or community. The toll on their health can be devastating: social isolation has been linked to higher blood pressure, increased susceptibility to the flu and other infectious diseases, greater risk of heart disease, and earlier onset of dementia.

“As we age, social connections can be an important contributor to our well-being,” said GSA Executive Director and CEO James Appleby, BSPharm, MPH. “Now through our Public Policy & Aging Report, I am proud that GSA is adding momentum to research in this topic area — ultimately leading to new evidence-based insights that can be translated into sound policy and practice.”

Appleby sits on the Executive Council of Connect2Affect, an initiative led by the AARP Foundation that aims to identify solutions that reduce loneliness among older Americans.

Lisa Marsh Ryerson, president of the AARP Foundation, contributed the first article to the PP&AR’s lineup. In addition to describing the efforts of Connect2Affect, she reports on several new ventures underway at the foundation.
From the Executive Director

GSA Members Lead the Way in Demonstrating 2020 Vision

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

In my role as executive director, nothing is more rewarding than seeing GSA members making an impact through their collective work. On the cover of this month’s issue, you’ll read about a group of members who contributed to important new dementia care practice recommendations. What an essential contribution to address this critical issue.

There’s another project underway now being steered by members that I’d like to update you on — because it’s one that is focused on keeping GSA strong for years to come.

As the GSA looks towards our 75th anniversary in 2020, we continue to explore new ways to enhance the benefits we provide to members based in the U.S. and abroad, and evaluate opportunities for strengthening the Society for the next 75 years. GSA’s governance structure hasn’t significantly changed from the framework laid down at its founding. With the approval of the GSA Council, a workgroup led by Immediate Past President Barbara Resnick has been reviewing our system of governance, including the membership structure and roles of various committees and interest groups.

Last October, we asked GSA members to give input on an important set of strategic questions currently being addressed by the Executive Committee and members of GSA’s senior leadership. More than 1,000 of you responded! You provided important feedback on membership value, membership structure, membership services, membership affiliations, and demographics. I’m grateful to everyone who contributed to this process and I want to provide an update on how this work is moving forward.

The GSA Governance Workgroup selected an outside organization, Quantum Governance L3C, to manage this governance evaluation. The Quantum team has worked with hundreds of associations and nonprofits to assess and strengthen their practices to achieve mission success.

Quantum assessed GSA across eight critical functional areas, providing feedback and identifying gaps or areas for improvement that will help GSA achieve its vision, mission, and strategic goals.

Part of this evaluation included a two-day planning meeting, which was held in the Washington, DC, area. Retreat attendees included members of the GSA Governance Workgroup, 2018 Executive Committee, 2018 Council, and GSA staffers. We had representatives from all four of GSA’s professional sections, Emerging Scholar and Professional Organization, and Association for Gerontology in Higher Education.

Consultants from Quantum Governance led the participants through various exercises to review key findings, learn governance best practices, discuss critical strategic questions, and review bold actions to implement.

The outcomes of this planning meeting, and appropriate next steps, were considered at a subsequent meeting of the GSA Executive Committee. The Committee has moved forward in establishing two Task Forces to work in parallel — one focused on strategic planning and the other on governance. Members from the Executive Committee have been identified as liaisons to both task forces and workgroup members will be assigned to participate by Resnick and current GSA President David Ekerdt. The task forces will update the GSA leadership as their respective work unfolds throughout 2018.

I offer my congratulations to the GSA Governance Workgroup for leading us to this point. Your commitment to GSA is commendable, as is your ability to envision a meaningful path forward — a clear vision as GSA approaches its 75th anniversary in 2020 and for generations beyond.

We will continue to solicit additional member feedback along the way, so thank you in advance!
**In Memoriam**

**Margaret “Pat” Mitchell Hastings, PhD**, passed away on December 25 at age 80. She dedicated her life to the study of developmental disabilities, mental health, and aging, impacting innumerable members of her community and country with her efforts in education, social work, public policy legislation, and aging. She served as director of the Center for Learning and on the Graduate Faculty at National College from 1971 to 1976, and as executive director of the Illinois Commission on Mental Health and Developmental Disabilities from 1976 to 1985. She later founded and directed the dual-degree MPH/MBA program at the University of Illinois at Chicago while a professor of Health Resources Management from 1986 to 1993. In 1995 and again in 2005 she represented the Illinois area at the decennial White House Conference on Aging. Hastings was a visiting professor at multiple Universities and led the Policy and Management Institute, a consulting firm focused on helping organizations improve their practices in the fields of mental health and aging.

**New Books by Members**

- “The Gerontological Imagination: An Integrative Paradigm of Aging,” by Kenneth Ferraro, PhD, FGSA. Published by Oxford University Press, 2018.
- “Introduction to Senior Transportation: Enhancing Community Mobility and Transportation Services,” by Helen Kerschner, PhD; Nina Silverstein, PhD, FGSA. Published by Routledge, 2018.
- “A Hands-on Approach to Teaching about Aging: 32 Activities for the Classroom and Beyond,” by Hallie Baker, PhD; Tina Kruger, PhD; and Rona Karasik, PhD, FGSA.

**Members in the News**

- On January 11, Thomas Gill, MD, FGSA, and Cynthia Brown, MD, FGSA, were interviewed by Kaiser Health News in an article titled, “For Elder Health, Trips to the ER are Often a Tipping Point.” The two discussed the importance of geriatric expertise in the emergency room and how critical transition decisions can make big impact.
- Steven Wallace, PhD, FGSA, contributed to an article in the Huffington Post on January 3 titled “Aging, Undocumented and Uninsured Immigrants Challenge Cities and States.” The piece focused on the growing number of older adult undocumented immigrants and their access or lack thereof to healthcare.

**Colleague Connection**

This month’s $25 amazon.com gift certificate winner: **Ellen Idler, PhD, FGSA**

The recipient, who became eligible after referring new member John Pothen, BS 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: **Phillip G. Clark, ScD, FGSA**

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

**Next Avenue Names Top Influencers in Aging**

Next Avenue selected 50 “influencers in aging” in 2017. These individuals are at the “forefront of changing how we age and think about aging as they further innovation and knowledge in their respective fields.” Ten of these influencers are GSA members: Gretchen Alkema, PhD, FGSA; Jaqueline Angel, PhD, FGSA; Kathy Black, PhD, FGSA; Richard Browdie, MBA, FGSA; Amanda Cavaleri, BA; Dean Pinchas Cohen, MD, FGSA; Julene Johnson, PhD, FGSA; Karen Lincoln, PhD, FGSA; Robyn Stone, DrPH, FGSA; and Carol Zernial, MA.

**Zwetchkenbaum Takes Two Top Dentistry Posts**

Samuel Zwetchkenbaum, DDS, MPH, was recently named to two leadership roles in national professional organizations. In October 2017, he began his term as president of the Special Care Dentistry Association, which supports dental educators and clinicians working with patients with special needs. In November 2017, he was named chair of the Association of State and Territorial Dental Directors Healthy Aging Committee, which serves as a focal point for healthy aging issues and resources for state oral health programs. Since November 2016, Zwetchkenbaum has served as the dental director of the Oral Health Program in the Rhode Island Department of Health.

**Members Join AGE Board of Directors**

Several GSA members were recently elected to the American Aging Association (AGE) Board of Directors, including George Stuphin, PhD; Kristin Gribble, PhD; and R. Michael Anson, PhD. Rozalyn Anderson, PhD, FGSA, was named president-elect-elect and will become a voting member of the AGE Executive Committee as president-elect following the AGE annual meeting in June 2018.

**GSA Connect Corner**

- Andrew Wister, PhD, FGSA: “I wanted to point attention to the UK’s appointment of a Minister of Loneliness this week. Loneliness is the perception of being disconnected from others and it affects about one in five people. The problem is exacerbated by age that addressing loneliness would not only help struggling individuals, it would reduce strain on the health system. I applaud the idea and shared some of my thoughts with CBCNews.”
- Pamela Saunders, PhD: “I have two questions. 1) Which graduate school fairs do you attend to recruit students to your gerontology programs? 2) What undergraduate majors (e.g., psychology, sociology, marketing) tend to pursue masters degrees in gerontology/aging? Thanks for your feedback.”
You hear a lot about legislation, advocacy, and lobbying from me and your inside-the-beltway colleagues. We are always spouting off our “knowledge” or “insights” about the budget, tax, and appropriations bills, and the reauthorization of the Older Americans Act, the Geriatrics Workforce Education Program, Children’s Health Insurance Program, or other laws that may be about to expire. Many GSA members have been involved in research that has led to legislation and some have helped draft policies or provisions that end up in legislation and law. Now we are becoming more acutely aware of the critical role that administrative actions and regulations play in shaping public policy. Administrative advocacy is important as an avenue of influence distinct from legislative advocacy.

Administrative advocacy has always been important, but with the Trump Administration’s pledge to use its executive powers to cut regulations and red tape, there is the possibility that decades of work on a multitude of issues could be eliminated or significantly modified. This month I will share my perspective on all this administrative talk and why it matters to us and how we can use our knowledge and experience to influence the process, just as we do when it comes to legislation.

President Donald Trump campaigned on cutting regulation and red tape thought to hurt our economy. During his first days in office, he signed an executive order requiring agencies to slash two regulations for every new regulation put into place. Later in the year he claimed that they had cut 22 regulations for each new regulation put in place. According to the White House, in 2017, agencies issued 67 deregulatory actions, withdrew or delayed 1,579 planned regulatory actions. In a statement posted online, the president said his administration “achieved $8.1 billion in lifetime net regulatory cost savings, the equivalent of $570 million per year. … In contrast, the previous administration imposed between $5.7 billion and $15.2 billion in annualized regulatory costs in its final eight months in office.”

Whether these numbers are accurate or not, these are regulations that affect almost every aspect of our lives, from food and mine safety to education and the environment to Medicare, Medicaid, and the data we collect on older adults. In fact, there is now so much activity in this policy space that the Center on Regulation and Markets at the Brookings Institution, among others, has created a system to track and report on deregulation. In addition to the procedures the administration has used, Congress has sent 15 planned regulatory actions. In a statement posted online, the president said his administration “achieved $8.1 billion in lifetime net regulatory cost savings, the equivalent of $570 million per year. … In contrast, the previous administration imposed between $5.7 billion and $15.2 billion in annualized regulatory costs in its final eight months in office.”

It is true that the administrative work often starts with a bill becoming law. Once a law is codified, the appropriate federal or state agency comes up with interpretations of how the law is to be implemented. Few bills are so clear and detailed that everyone who reads them knows exactly how they are to be implemented, so the federal agency with responsibility to oversee the new program or procedure (e.g., the Department of Health and Human Services, the Centers for Medicare and Medicaid Services, the Department of Transportation, etc.) must propose regulations or policies and share that information with stakeholders and the public. That creates an opportunity to shape the interpretation of the law and how it will work in the states and communities. The agency typically will put a notice in the Federal Register describing the program and asking for input/comments on various aspects of it.

One can track Federal Register announcements, calls for comments or information online; they are often called “notices of proposed rulemaking” or “guidance,” “final rules,” “executive orders,” or “information collection” notices. One can sign up for the Federal Register daily index or updates from various agencies on selected topics. The notices provide specific information on the issue or program and how one can file comments. At times agencies will conduct conference calls or webinars or hold meetings to solicit input.

GSA members who follow certain topics closely will often post on GSA Connect online networking platform about requests for comments, proposed rulemaking, etc, making GSA Connect a good source of up-to-date notifications.

In some situations, the judicial system gets involved in interpreting how the law should be implemented because there are disputes between stakeholders, the federal government or states. Statutory interpretation by the courts and the resulting case law sometimes determines how the statute, regulations, and guidance are ultimately implemented.

There are an incredible range of issues covered in the regulatory process and aging-related examples include regulations on the Affordable Care Act, the Long-Term Care Ombudsman Program, health care quality measurement, Social Security, eldercare workforce overtime pay, nursing home arbitration agreements, penalties for overcharging for drugs and for poor nursing home care, and many more. Recently, aging advocates have been particularly focused on rules that would “reform” and delay the Medicare and Medicaid Requirements of Participation that nursing homes must follow. Advocates for nursing home residents have
argued for retaining the regulations issued in October 2016, but the nursing home industry with support from many Republicans in the House have pushed for changes to the regulations that had been developed with input from nearly 10,000 comments. Revisions could be made to many aspects of the regulations including facility assessment, behavioral health, timeframes for abuse reporting, staff training, and grievance procedures requirements. The Centers for Medicare and Medicaid Services also issued a proposed rule that eliminates the ban on forcing families to enter pre-dispute arbitration.

So, what does this all mean to us? First, there are others trying to influence the administrative law/regulation process, so it is very important that we use our knowledge to educate, advocate, and ask for what we want. There are some basic things we can do to be effective including identifying lead agencies, monitoring their work, and developing relationships with the key staff who will draft the rules. Attempt to influence the initial draft of the rule; many staff want to know what you as experts think about how best to implement programs. They also want to know whether states or others are complying with federal rules. They may also be interested in your input on materials that are being developed, such as “Medicare and You,” one of the primary informational brochures distributed to the public about Medicare. Work with other organizations who are tracking the issue and coordinate comments during the comment period to maximize impact.

In closing, I want to thank Vicki Gottlich, who’s now the director of the Center for Policy and Evaluation at the Administration for Community Living. She’s a long-time friend and advocate for older adults and individuals with disabilities who taught me much of what I know about administrative advocacy. I’m grateful to be able to share what I’ve learned.

**Recent GSA Policy Actions**

**GSA** Senior Director of Strategic Alliances and Communications Karen Tracy and Senior Director of Professional Affairs and Membership Patricia D’Antonio represented the Society at Oral Health America’s Wisdom Tooth Project Symposia in early February. The theme of the invitation-only convening was “Moving Towards 2029: The Future of Tooth Wisdom for Older Adults.” Building on past symposia, participants provided input on strategies to address oral health in older adults as it impacts overall health.

**GSA** signed on in support of an issue brief released by the Academy of Integrative Pain Management to support the inclusion of pain-related language in a forthcoming legislation package known as CARA 2.0. These measures are designed to address the opioid misuse and overdose epidemic, and are so named as a reference to 2016’s Comprehensive Addiction and Recovery Act (CARA). While the law contains some language about pain, there are additional opportunities to address the most important needs for people with chronic pain. The issue brief calls for federal research investment in pragmatic clinical trials that inform clinicians, payers, and policymakers about the optimal use of existing pharmacologic and nonpharmacologic pain treatments; and for passage of the Opioids and STOP Pain Initiative Act, which appropriates $5 billion over five years for a new National Institutes of Health-directed initiative to intensify and coordinate fundamental, translational, and clinical pain research.

**new resources**

**GSA Welcomes Registrants for Spring Webinar Lineup**
GSA is accepting registrations for four upcoming webinar programs. Among them are the second and third installments of GSA’s three-part series on using the Health and Retirement Study (HRS); the March 27 webinar will focus on cognition data and the April 24 webinar will focus on biomarkers data. Also on the schedule is “Methodological Innovations” on April 3; and during Careers in Aging Week, GSA will offer “Non-Academic Careers in Aging” on April 6. Sign up at www.geron.org/webinar.

**HRSA Unveils Dementia Care Training Modules**
The Health Resources and Services Administration (HRSA) recently released new training modules to educate the primary care workforce and caregivers about caring for people living with dementia and develop skills to address the challenges. These new modules are designed to better support the caregivers and providers to become better members of the team who support people living with dementia. The HRSA also created a dementia curriculum for the primary care workforce which includes primary care practitioners, health professions faculty and students, primary care practitioners, and direct service providers. The curriculum has 16 core modules and four supplemental modules designed to train the primary care workforce about dementia care and to help providers address caregiver needs. The curriculum is flexible and can be adapted to meet specific training needs. These tools are accessible at bit.ly/2tbKjha.
AGHE Honors Distinguished Individuals

The Association for Gerontology in Higher Education (AGHE) recognized its newest elected officers, fellows, and awardees at its recent 44th Annual Meeting and Educational Leadership Conference in Atlanta, Georgia.

Officers
These individuals are responsible for matters of governance and strategic planning for the organization.

Treasurer-Elect
Lisa Hollis Sawyer, PhD, Northeastern Illinois University

Secretary
Carrie Andreoletti, PhD, Central Connecticut State University

Members-At-Large
Karen Kopera-Frye, PhD, New Mexico State University
Thomas A. Teasdale, DrPH, University of Oklahoma
Loriena A. Yancura, PhD, University of Hawai‘i at Mānoa

Fellows
AGHE fellow status is an honor that recognizes outstanding leadership in gerontology and geriatrics education by established scholars and educators.

Hallie E. Baker, PhD, Muskingum University
Maria L. Claver, PhD, California State University, Long Beach
Elizabeth A. Elmore, PhD, Stockton University
Heidi H. Ewen, PhD, University of Georgia
Janet S. Hahn, PhD, Western Michigan University
Tina M. Kruger, PhD, Indiana State University

Awardees

Clark Tibbits Award
Presented to Marilyn R. Gugliucci, PhD, University of New England
This award was established in 1980 to recognize individuals who and organizations that have made outstanding contributions to the advancement gerontology as a field of study in institutions of higher education.

Hiram J. Friedsam Mentorship Award
Presented to Phillip G. Clark, ScD, University of Rhode Island
This award, named for an outstanding mentor in gerontology, is given to an individual who has contributed to gerontological education through excellence in mentorship to students, faculty, and administrators.

Distinguished Faculty Award
Presented to Phyllis A. Greenberg, PhD, St. Cloud State University
This award recognizes persons whose teaching stands out as exemplary, innovative, of impact, or any combination thereof.

Rising Star Early Career Faculty Award
Presented to Eric C. Schoenmakers, PhD, Fontys University of Applied Sciences
This award recognizes new faculty whose teaching and/or leadership stands out as impactful and innovative.

David A. Peterson Gerontology & Geriatrics Education Best Paper of the Volume Award
Presented to Liz Seidel, MSW, ACRIA; and Stephen E. Karpiak, PhD, ACRIA; and Mark Brennan-Ing, PhD, ACRIA, for “Training Senior Service Providers about HIV and aging: Evaluation of a Multyear, Multicity Initiative”
The purpose of this award is to recognize excellence in scholarship in academic gerontology in AGHE’s official journal, Gerontology & Geriatrics Education.

Student Leadership Award
Presented to Catherine Pérez, MS, University of Southern California
This award recognizes students whose leadership has advanced the goals and mission of AGHE as well as the respective goals of their AGHE-affiliated institutions.

Graduate Student Paper Award
Presented to Jill J. Naar, MS, Virginia Polytechnic Institute and State University
This award recognizes excellence in scholarly work by a student at an AGHE member institution who presents his or her work at the annual meeting.

James McKenney Student Travel Award
Presented to Travis Friot, RYT 200, Portland Community College; Sarah D. Holmes, MSW, University of Maryland, Baltimore County; Lars Hopman, Windesheim University of Applied Sciences; Meghan McDarby, BS, Washington University in St. Louis; Jill J. Naar, MS, Virginia Polytechnic Institute & State University; Rachel Sluder, BS, University of New England; Briana N. Sprague, MS, The Pennsylvania State University; Daniel B. Stewart, MS, Saint Louis University; Maureen E. Templeman, MEd, University of South Florida; and Loretta Wolf, MA, University of Nebraska, Omaha
This award provides travel funds for students to attend the AGHE Annual Meeting and Educational Leadership Conference. Approximately 10 students will be selected to receive travel funds each year.

Book Award for Best Children’s Literature on Aging
Presented to Elijah Takushi, Carly Tan, and Colby Takeda, It’s Just Aging (2017) for Primary Reader Category
Lindsay Eagar, Hour of the Bees (2016) for Elementary Reader Category
This award recognizes positive portrayals of older adults in children’s literature.
Getting Connected with GSA Connect!

By Allyson T. Brothers, PhD

Have you been hearing a lot about GSA Connect lately? Maybe you’re using it often — if so, that’s fantastic! Or, maybe you’re not sure where to start. If you’re just trying to keep up with that constantly-full inbox, perhaps you haven’t taken the time to check it out yet. If you’re in this boat, you can start by carving out just 10 minutes of your day to make sure you’re getting the most out of GSA Connect.

Follow the tips below to start accessing the many resources and connections GSA Connect offers. Hopefully doing so will help to shape your professional/graduate career in one small (or even big!) way and maximize your connection to not only GSA as a society, but also within ESPO.

To Access GSA Connect

From www.geron.org, click on Stay Connected/GSAConnect and click on the GSA Connect hyperlink in the first paragraph. Then, sign in.

Tip: If you’ve never logged in, your account and profile are waiting for you! Use the same login information as for www.geron.org. Also, keep an eye out for the helpful new Tuesday postings from GSA staff member Gena Schoen.

Once you’re signed in to GSAConnect, click on Communities/My Communities in the horizontal task bar. Now, you’ll see the ESPO Community group, and any other communities you are a member of (such as Interest Groups, Sections, Scientific Meetings, etc.)

Check Out GSA Connect’s Many Features

• Read recent Announcements (Community Home tab)
  Example: Keep an eye out here to find out when you can register for the summer session of the ESPO virtual peer-led Dissertation Writing Group so that you can knock out that next chapter of your dissertation with some accountability and support.

• Read the Discussion Thread posts (Discussion tab)
  Example: See the brief webinar for tips on submitting an abstract for the GSA Annual Scientific Meeting in Boston this November.

• Access tips and handy resources (Library tab)
  Example: Salom Teshale, the past communications chair, posted the link, “How to Keep Up with the Scientific Literature” from sciencemag.org

• Check out some blog posts by other GSA members (Blog tab)
  Example: job postings!

• Search for a GSA member (Members tab)
  Example: You’d LOVE to discuss a recent article that you just read and are excited about. See if the author is a GSA member, and reach out to express your interest in his or her work.

• Change your e-mail settings to customize the notifications you see in your inbox

• Post something!
  Example: Have a great idea, resource, tip, or question that you’d like to ask fellow ESPO members? Don’t be shy! Post a new message to the Discussion board.

The ESPO executive committee is always available at espo@geron.org for questions on this matter to ensure you get the most out of your membership!
Continued from page 1 – GSA Partners on Release of Dementia Care Practice Recommendations

The new recommendations were developed by 27 dementia care experts convened by the Alzheimer’s Association — many of whom are GSA members — and are based on a comprehensive review of current evidence, best practice, and expert opinion. The recommendations seek to better define quality care across all care settings, and throughout the disease course. They are intended for professional care providers who work with individuals living with dementia and their families in long-term and community-based care settings.

In addition to updating and enhancing previous recommendations in areas familiar to the dementia care community, the recommendations break new ground. Notably, the recommendations offer guidance to community-based and residential care providers on detection and diagnosis and ongoing medical management — topics typically reserved for clinicians. Recommendations in these two areas are written specifically for non-physician care providers and address what these providers can do to help with these important aspects of holistic, person-centered dementia care.

“Detection and diagnosis, and medical management are critical, vital areas of care. While clinicians must continue to take a lead role in these areas, there are important contributions dementia care providers can make to improve outcomes in these areas,” Fazio said. “Our recommendations outline appropriate actions dementia care providers can make to complement and enhance the work clinicians are doing. Having both groups focus on these critical areas will result in better care for people struggling with this disease.”

Maslow, who serves as a GSA visiting scholar and a member of GSA’s Cognitive Impairment Detection and Earlier Diagnosis Workgroup, was one of the experts who contributed to the development of the new recommendations. She and workgroup Chair Richard H. Forstinsky, PhD, FGSA, also co-authored one of the supporting papers in The Gerontologist, where they discuss the GSA KAER model (kickstart, assess, evaluate, refer) developed by the workgroup.

“Rick and I used the four-step KAER model as a framework for discussing ways in which nonphysician care providers are able to assist in increasing detection of cognitive impairment and diagnosis of dementia,” Maslow said, adding that the KAER model emphasizes that only physicians, licensed physician assistants, and licensed nurse practitioners are authorized to diagnose dementia in the U.S.

“Our article provides recommendations for how nonphysician care providers who work with older adults and their families in community and residential care settings can help — by encouraging older adults who have concerns about their memory or other cognitive abilities and their families to talk with the older adult’s physician about their concerns and encouraging them to obtain a diagnostic evaluation conducted by a physician as needed,” she said.

Maslow was also among several GSA members who spoke about the new recommendations at a Capitol Hill briefing on February 14.

Other areas covered by the recommendations include:

- Fundamentals of person-centered care
- Assessment and care planning
- Information, education and support
- Ongoing care for behavioral and psychological symptoms of dementia
- Support of activities in daily living
- Staffing
- Supportive and therapeutic environments
- Transitions and coordination of services

The supplemental issue of The Gerontologist containing the recommendations is free to view at academic.oup.com/gerontologist.

Continued from page 1 – Gerontologists Tackle Social Isolation, Increasingly a Public Health Concern

One involves a partnership with Lyft, the USC Center for Body Computing, UnitedHealth Group, and other stakeholders to study whether a ride-hailing app can improve health care in older adults. A second involves the pilot test of an interactive device with built-in speech recognition and the ability to provide voice responses; it is designed to make it easy, fast, and fun for older adults to get reminders and community information, and to discover and deepen new relationships. The foundation is also supporting a project that evaluates the effectiveness of phone outreach in reducing the incidence of poor health among low-income older adults who live alone.

A subsequent article by Julianne Holt-Lunstand, PhD, of Brigham Young University, demonstrates the need for such innovations. She concludes that there is now substantial evidence that being socially connected significantly reduces the risk for premature mortality, and that lacking social connectedness significantly increases risk. Moreover, these risks exceed those associated with many risk factors that receive substantial public health resources: obesity, air pollution, smoking, and physical inactivity.

The new issue of PPAAR, which contains 10 articles and an opening editorial, is titled “Lack of Social Connectedness and Its Consequences” and can be accessed at bit.ly/2HShxpA.

ADVERTISE WITH US!

This newsletter reaches GSA’s 5,500 members both in print and online. Gerontology News accepts ads for conferences and special events, fellowships, jobs, and degree programs relevant to the field of aging.

See the current rates at www.geron.org/advertising.
RRF Accepting New Grant Proposals

The Retirement Research Foundation’s (RRF) is a private foundation devoted exclusively to aging and retirement issues. Throughout its history, the RRF has awarded more than $200 million for innovative projects that benefit older Americans. Through its responsive grants program, the RRF supports advocacy; direct service; education and training programs for professionals working with elders; and research to seek causes and solutions to significant problems of older adults. Proposals for direct service projects are considered from organizations based in seven states: Illinois, Indiana, Iowa, Kentucky, Missouri, Wisconsin, or Florida. Advocacy, training, and research projects, all with national relevance, are considered from organizations located anywhere in the U.S. The next proposal application deadline is May 1. To learn more, visit www.rrf.org.

Policy Fellows Program Welcomes Applications

The Health and Aging Policy Fellows Program is seeking candidates with a strong commitment to health and aging issues, leadership potential, and an interest in aging-relevant policy work. The program offers two different tracks for individual placement: a residential track that includes a nine-to-12-month placement in Washington, DC or at a state agency; or a non-residential track that includes a health policy project and brief placement(s) throughout the year at relevant sites. The project may be focused at a global, federal, state or community level. Fellows are selected each year through a national competition based on their commitment to health and aging issues, leadership potential, and interest in impacting policy. The program has a broad interdisciplinary focus, and fellows have included physicians, nurses, social workers, psychologists, dieticians, healthcare administrators, epidemiologists, economists, and lawyers from academic and practice settings, spanning career stages from newly minted PhDs to senior professors and community leaders. The program is open to U.S. citizens at all career stages. Core program components focused on career development and professional enrichment are provided for fellows in all tracks. The Health and Aging Policy Fellows Program has been made possible through the support of The Atlantic Philanthropies and the John A. Hartford Foundation. The application deadline is April 15. To learn more about this program, visit www.healthandagingpolicy.org.

The TRIPLL webinar series is a web based training resource for health professionals, researchers, and others with interest (or working) in the aging field. Please visit our website at www.tripll.org for more information or contact Jacquie Howard at jah3011@med.cornell.edu

March 26, 2018 | 1pm-2pm EST:
Presenter: Dimitris Kiosses, PhD, Weill Cornell Medicine
PATH-Pain: A Behavioral Intervention For Older Adults With Negative Emotions And Chronic Pain In Primary Care

April 30, 2018 | 1pm-2pm EST
Presenter: Una Makris, MD, UT Southwestern Medical Center
Developing, Refining, and Evaluating a Behavioral Intervention that Targets Comorbid Chronic Back Pain and Depression in Older Adults

May 14, 2018 | 1pm-2pm EST
Presenter: Mary Janevic, PhD, MPH, University of Michigan
A Technology-Assisted Chronic Pain Self-Management Intervention for Older Adults in a Low-income, Urban Setting

June 26, 2018 | 1pm-2pm EST
Presenter: Julie Wetherell, PhD, University of California at San Diego
Acceptance and Commitment Therapy for Chronic Pain in Older Adults

RAND is pleased to announce the 25th annual RAND Summer Institute (RSI), which will take place in Santa Monica, CA, July 9-12, 2018.

The RSI consists of two conferences addressing critical issues facing our aging population: a Mini-Medical School for Social Scientists (July 9-10) and a workshop on the Demography, Economics, Psychology and Epidemiology of Aging (July 11-12). The primary aim of the RSI is to expose scholars interested in the study of aging to a wide range of research being conducted in fields beyond their own specialties.

We invite all interested researchers to apply to attend the 2018 RSI. Applicants may apply for fellowship support to pay for registration, travel, and accommodations.

Both the Mini-Med School and the workshop are described more fully at our web site: http://www.rand.org/labor/aging/rsi/.

For additional information, please contact Cary Greif (cary_greif@rand.org).

RSI is sponsored by the National Institute on Aging and the Office of Behavioral and Social Sciences Research at the National Institutes of Health. RAND is an Equal Opportunity Employer Minorities/Females/Vets/Disabled.
Earn a Master’s degree from the USC Leonard Davis School of Gerontology

The USC Leonard Davis School of Gerontology is the oldest institution dedicated to aging research in the nation. We offer the most comprehensive selection of gerontology degree programs found anywhere, and we are a pioneer in distance learning education. Our mission is to increase the quality of life for all older adults via research, service and education.

All of our Masters’ programs are available in their entirety to distance learning students online and also to those who are able to attend classes on campus. We also award $500,000 to students in scholarships annually.

Master of Science in Gerontology
The Master of Science in Gerontology, our flagship and most popular graduate program, positions graduates to pursue their passion for policy and research while studying the mechanics and mysteries of longevity, aging and population health. Additionally, this program offers an internship as well as research methods and grant writing in

Master of Arts in Gerontology
The Master of Arts in Gerontology is geared toward busy professionals who already have five or more years of experience in the field of aging, but were educated in other areas. The MAG program will supplement their education so graduates can better accommodate the special needs of older adults.

Master of Aging Services Management
The Master of Aging Services Management provides the opportunity for current and future aging services managers to acquire the knowledge and skills needed to respond to a rapidly growing population of older people. Students will be prepared to utilize their skills and respond effectively to changes in the economic, legal and regulatory environments in which they are employed.

Master of Long Term Care Administration
The Master of Long Term Care Administration program is the perfect solution for the working professionals who have not had formal education in aging. The curriculum blends an exploration of the social, psychological and biological aspects of aging with training in the administration and management of long term care organizations.

Graduate Certificate in Gerontology
The Graduate Certificate in Gerontology provides an opportunity to obtain a greater understanding of gerontology theory and research. The program consists of 16 units of study in gerontology designed to offer a broad range of knowledge, which relate to professional practice.

The priority application deadline for the Fall 2018 term is March 15, 2018. We will continue to review applications on a rolling basis after this deadline until classes start in August.

For inquiries email Lisa Huynh - lisahuyn@usc.edu or call (213) 740-5426

For more info visit us @ gero.usc.edu

USC Leonard Davis
School of Gerontology
Emerging Professionals, Mentors Offered Peer Review Opportunities

The GSA journals provide two opportunities for new professionals and new reviewers to be involved in the journal peer review process. Novice reviewers are added as an additional reviewer to the peer review panel for manuscripts that are sent out for external peer review. All reviewers are asked to complete their reviews the same way and within the same amount of time. Novice reviews are given full consideration in the editorial decision. This process gives new professionals an opportunity not only to review a manuscript, but also to experience the review process, editorial decision, and the manuscript revision process. In addition to this opportunity, GSA allows individuals to serve as a mentor to new professionals interested in the review process. The current peer review form allows for this designation so that all invited reviews can be completed with a reviewer-in-training. Emerging professionals interested in becoming a novice reviewer are asked to create an account at the interested journal’s online submission site (academic.oup.com/gsa) and to email the editorial office for the journal selected so that the account may be designated appropriately. Be sure to enter areas of expertise via the keywords feature. These keywords are used to match potential reviewers with incoming manuscripts.

GSA’s Newest Journal Accepting Submissions

Innovation in Aging, GSA’s recently launched online open access journal, is welcoming submissions of manuscripts that describe conceptually sound, methodologically rigorous, hypothesis-driven research on aging and the life course — research that has high potential for translating scientific knowledge to improve older adults’ health, functioning, and well-being. Topics of manuscripts may include evaluation of interventions, approaches, and policies; assessment of innovative research methods; exploration of factors and processes that affect outcomes during aging and the life course; and interdisciplinary research that transfers concepts, methodologies, and interventions from other fields to the study of aging and the life course. Innovation in Aging is a fully open access journal, which allows free access to all of its content and increases the readership of articles. Open access journals have no subscriptions; instead, publication charges offset the cost of the journal. To mark the launch of Innovation in Aging, GSA and publisher Oxford University Press are providing funds to cover all publication costs for authors for the first 200 articles published in the journal. Visit geron.org/innovatage to view the first issues and instructions to authors.

Assistant Professor – Tenure Track
Department of Gerontology • Faculty of Arts and Social Sciences

The Department of Gerontology is inviting applications for a full-time, tenure-track appointment at the rank of Assistant Professor in the areas of Mental Health and Aging, and/or Ethnicity and Aging. The expected start date is September 1, 2018. The Department of Gerontology and the Gerontology Research Centre (GRC) at Simon Fraser University are internationally reputed for education, research and knowledge dissemination on multiple areas of individual and population aging. We seek candidates who complement existing departmental strengths and have capacity and interest in interacting with other research groups both within and outside the department. Details about the Department and its current research and degree programs are available at http://www.sfu.ca/gerontology.html.

QUALIFICATIONS: The candidate must hold a PhD in a related field, in addition to having demonstrated excellence in research and teaching in the field of Gerontology. They will be expected to develop a strong, externally funded research program, effectively teach undergraduate and graduate courses in gerontology, successfully supervise graduate students, and participate in departmental activities. Applicants must have a strong publication record demonstrated by publications that make a significant contribution to the literature. Effective teaching can be demonstrated by highlights of teaching accomplishments, teaching evaluations and evidence of strong communication skills.

This is an entry-level position (Assistant Professor) open to candidates with the equivalent of up to approximately 10 years of relevant experience as a faculty member in a continuing research faculty appointment. Only those holding or those eligible to be promoted to the rank will be considered. The position is subject to availability of funding.

APPLICATIONS: Review of applications will begin April 1, 2018. Applications will be treated in confidence and should include a cover letter, a detailed curriculum vitae, a summary of research interests including a one-page outline of a potential five-year research program, a statement of teaching philosophy, up to three recent publications (pdf format), and the names and contact details of three individuals from whom the search committee can request letters of reference.

Email applications and attachments (a single PDF document is preferred) to geradmin@sfu.ca and mail a hard copy to:

Dr. Habib Chaudhury Chair, Department of Gerontology
Simon Fraser University; #2800 – 515 W. Hastings
Vancouver, BCV6B 5K3

NOTE: SFU is an equity employer and encourages applications from all qualified individuals including women, persons with disabilities, visible minorities, Indigenous Peoples, people of all sexual orientations and gender identities, and others who may contribute to the further diversification of the university. All qualified candidates are encouraged to apply; however, Canadian citizens and permanent residents will be given priority. Under the authority of the University Act personal information that is required by the University for academic appointment competitions will be collected. For further details see the http://www.sfu.ca/academic/Faculty_Openings/Collection_Notice.html
GSA’s Publications Committee is seeking nominations for the next editor-in-chief of *The Gerontologist* (term January 2019 to December 2022).

For a full position description and details on how to apply, go to [academic.oup.com/gerontologist](http://academic.oup.com/gerontologist)