GSA Partners with WHO on Journal Supplement

A new supplemental issue of The Gerontologist contains 12 articles that expand upon the major themes of the landmark World Health Organization (WHO) “World Report on Ageing and Health” released in late 2015. These articles are largely based on background papers that provided critical input to the development of the WHO report, which was the first of its kind. The supplement addresses such topics as elder abuse, determinants of health, threats to healthy aging, and medical and assistive health technology.

These publications demonstrate that if populations are to live not only long but also healthier lives, then decision makers, practitioners, and researchers will have to do more to address these important topics.

“The WHO report and the new journal supplement mark a real milestone in our work in public health with regard to aging, as they reframe the whole concept of healthy aging,” said Flavia Bustreo, MD, WHO’s assistant director-general for family, women’s, and children’s health.

“They shift the emphasis from the absence of disease to a focus on the functional ability that enables well-being in older age. And they provide a clear framework for global action.”

The research contained within the new publications also informed the WHO’s Global Strategy and Action Plan on Ageing and Health, which ministers of health from around the world will discuss at the upcoming World Health Assembly in May. This strategy looks to reorient health systems so they better meet the needs of older people, encourages every country to develop a system that can provide long-term care to older people with significant declines in health.

Continued on page 6

Campaign Spurs Intergenerational Action on Immunizations

GSA has signed on as the inaugural partner on Valuing Vaccines Across Generations, a new awareness campaign launched by the nonprofit advocacy organization Generations United with support from Pfizer.

This is an international effort that promotes vaccinations through a lifespan approach by providing tools and resources to encourage intergenerational conversations. Following its initial rollout in the U.S, the campaign will expand to other countries in late 2016.

“Vaccines are a life-saving intervention for people of all ages,” said GSA Executive Director and CEO James Appleby, BSPharm, MPH. “We are proud to be a part of a campaign that promotes the value of immunizations throughout the life course.”

The campaign’s tools — developed jointly by Generations United and GSA — include an infographic, campaign website, press release, and a social media toolkit including memes and health awareness celebration ties. These resources are available at www.bandageofhonor.com. Also under development are a series of video vignettes and a discussion guide that encourages educated conversations between generations about the value of vaccines.

“We have seen the positive impact of vaccines in preventing and even eliminating diseases over time,” said Donna Butts, executive director of...
Forget Hoverboards, Caregiving Tech Is the Future

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

In the season of Mother’s Day and Father’s Day, my thoughts turn to the many older parents receiving care from their families and other loved ones. Unpaid caregivers total nearly 40 million people in the U.S. I’ve shared stories of my family’s caregiving experiences with our mother in several newsletter columns. My siblings and I are fortunate to have a dear sister who now lives with her, serving as her caregiver with us in support. I also know many GSA members are a primary source of aid to their loved ones.

Helping moms, dads, and others enjoy a higher quality of life isn’t always easy, and is perhaps even more frustrating for career gerontologists. Allow yourself some grace, however — just because you’re an expert on the subject doesn’t mean you should know the immediate answer to every caregiving problem.

And despite a potential caregiver shortage looming on the horizon, there are numerous efforts underway that will transform the caregiving experience for the better.

The key to all of this is new technology. We are witnessing a groundswell of individuals and organizations who are hoping to demonstrate that a high-tech approach is ideally suited to the challenges of the high-touch environment of caregiving.

AARP, for example, published “Caregiving Innovation Frontiers” (goo.gl/yaUyhH) earlier this year, a report that outlines six areas of opportunity for disruptive innovation: daily essential activities, health and safety awareness, care coordination, transition support, social well-being, and caregiver quality of life.

What kind of companies can contribute to technology-based caregiver solutions? Last summer’s White House Conference on Aging welcomed Honor, a business that matches caregivers with care professionals. ReACT (Respect a Caregiver’s Time), Care.com, and the Massachusetts Institute of Technology used the occasion to announce a partnership to generate the tools employers need to effectively support employees who are caregivers. The White House also released a report in March from the President’s Council of Advisors on Science and Technology, titled “Independence, Technology, and Connection in Older Age” (http://1.usa.gov/1R6kNKk).

Leveraging technology for caregiving was a central theme of the 2016 What’s Next Boomer Business Summit in Washington, DC, in March. I was able to represent GSA at this event that annually convenes the businesses and organizations focused on the senior market. This meeting was an impressive display of entrepreneurship on caregiving, including such innovative products as an app from CareAngel, which utilizes virtual caregiving assistant technology that older adults can interact with.

The Consumer Technology Association (CTA, formerly the Consumer Electronics Association) has also taken an interest in this arena. The association used the Boomer Business Summit to release a new white paper, “CTA Market Report: Active Aging,” which states that “the active aging market, which consists of both seniors and their family caregivers, represented a $24.4 billion market opportunity in 2015 and will grow to $42.7 billion in 2020.”

I see GSA members as playing a key role in the long-term success of these technology innovations. Getting the public to adopt them is one challenge, but more importantly, we need evidence-based research that shows these new products and services can deliver safe and replicable outcomes.

GSA will continue its advocacy for an adequately trained eldercare workforce. But it is reassuring to know that whatever the number of caregivers in the future may be, they will have an unprecedented number of new tools at their disposal.

World Congress of Gerontology and Geriatrics
July 23 to 27, 2017
www.iagg2017.org

Next date to remember: July 15, 2016
Abstract submission period ends
New Books by Members

• “The Big Move: Life between the Turning Points,” by GSA Fellows Anne M. Wyatt-Brown, PhD, Helen Q. Kivnick, PhD, and Ruth Ray Karpen. Published by Indiana University Press, 2016.

• “Autism Spectrum Disorder in Mid and Later Life,” edited by GSA Fellow Scott D. Wright, PhD. Published by Jessica Kingley Publishers, 2016.

Members in the News

• USA Today interviewed former GSA President Rita Effros, PhD, and GSA Fellow David Reuben, MD, for an article published on February 29. The piece, titled “Freshmen Learn About Growing Old,” highlighted a UCLA class about aging, death, and career opportunities in the field of aging.

• The New York Times quoted GSA Fellows Monika Ardelt, PhD, and Laura Carstensen, PhD, for an article published on December 25. The piece, titled “The Wisdom of the Aged,” interviewed six older adults living in New York about their quality of life and happiness.

• GSA Fellow Carol Jagger, PhD, was featured in a news-medical.net article on February 29. The piece, titled “Are We Ageing Healthily?” discussed her recent research on cognitive impairment, disability, and self-rated health.

• Research from GSA Fellow Kristine Ajrouch, PhD, was highlighted by New America Media on February 25. The article, titled “For Arab Americans, Elders Pave The Future,” looked at how cultural traditions influence aging and older adults in the Arab American community.

Colleague Connection

This month’s $25 amazon.com gift certificate winner: Stephanie Hicks, MA
The recipient, who became eligible after referring new member Jillian Minahan, 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: Joyce Weil, PhD
Visit www.geron.org/membership to ask questions and read previous interviews.

Connection promotion visit www.geron.org/connection.

Whitfield Named Wayne State’s New Provost
GSA Fellow Keith Whitfield, PhD, the vice provost for academic affairs at Duke University and an expert on aging among African Americans, has been named the new provost of Wayne State University, effective June 1. Whitfield also holds Duke appointments as professor in the Department of Psychology and Neuroscience, research professor in the Department of Geriatric Medicine at Duke University Medical Center, and senior fellow in the Center for the Study of Aging and Human Development. He also is co-director of the Center on Biobehavioral Health Disparities Research. Whitfield is a past chair of GSA’s Behavioral and Social Sciences Section and a founder of The Mentoring Effect, a special project of the GSA Innovation Fund.

Bern-Klug Earns NASW Award
The National Association of Social Workers (NASW) has announced that GSA Fellow Mercedes Bern-Klug, PhD, MSW, has been awarded the NASW Knee/Whitman Outstanding Achievement Award in Health Policy. This distinction will be presented in Washington, DC, in June. Bern-Klug is a John A. Hartford geriatric social work faculty scholar at the University of Iowa School of Social Work. The award reflects her efforts in enhancing nursing home social work nationally.

Calkins to Head Mayer-Rothschild Foundation
The Mayer-Rothschild Foundation, the only national philanthropy dedicated to person-centered care and improving the quality of lives of elders in long term care in the U.S, has named GSA Fellow Margaret Calkins, PhD, as its new executive director. Calkins brings more than 25 years of experience as a researcher, consultant, and educator to the foundation. An early pioneer in the field of environments for elders and people living with dementia, she worked closely with former foundation President Robert Nathan Mayer, PhD, for over a decade as he developed strategies that would have the most significant impact — moving from model programs in individual care communities to transforming the industry.

GSAConnect Corner

Below are highlights from recent discussions on the GSA Connect online networking platform. Join the conversation at connect.geron.org! Here’s what members are talking about:

• Patricia O’Neill, PhD: "James Birren was my teacher, my mentor, and my friend. The love and generosity he gave to ALL of his students and colleagues and his commitment to his profession were beyond measure. Jim Birren was unique in more ways than any of us will ever know or appreciate. He has left us an amazing legacy."

• Linda Royer, MPH, MSN, PhD, RN: “Has anyone recently engaged in research on this topic [healthy lifestyle perceptions of Korean Americans]? And where are there health-promoting community programs targeted to this population? I and my research team would be interested in connecting with you.”
Under D’Antonio’s Guidance, GSA Finds Meaningful Ways to Engage with NIA

As Congress settles into its election year schedule (light), posturing (adversarial), and addresses the budget (crumbling), I thought it would be a great time to focus on two bright spots for GSA: the continued bipartisan support for the National Institutes of Health (NIH) budget, and our relatively new senior director of professional affairs, Patricia “Trish” D’Antonio, RPh, MS, MBA, CGP.

Brian: Nine months on the job, you are immersed in all of the policy, research and professional affairs of GSA, including meeting Francis Collins, the NIH director, and Richard Hodes, the National Institute on Aging (NIA) Director. This is a great time to interview you and find out what projects you are working on in general and in particular what you learned at the recent Friends of the National Institute on Aging (FoNIA) meeting with Director Hodes. But first things first: you are trained as a clinical geriatric pharmacist and you have worked at the Washington, DC, Department of Health. What brought you to GSA?

Trish: Most of my career has been in geriatrics. I worked as a consultant pharmacist in the Philadelphia area before moving to Washington, DC, sixteen years ago. I worked for the American Society of Consultant Pharmacists developing education and resources for pharmacists and other health care professionals interested in the unique medication related needs of older adults. Most recently, I served as the executive director of the DC Board of Pharmacy, where I was responsible for the regulatory and policy development for the practice of pharmacy in the District. I met James Appleby and we got to discussing GSA’s current projects, and I was quite excited about playing a role. If you love the idea of advancing the field of gerontology and geriatrics by working with a group of dedicated practitioners, researchers, and educators, this is the place to be in DC.

Brian: Please give us a short rundown of your responsibilities at GSA.

Trish: I have a full plate these days! I represent GSA to our fellow professional organizations in town, oversee the work of the John A. Hartford Foundation Change AGEnts Initiative and the Institute of Medicine’s Family Caregiving Study dissemination project, and work with [GSA Director of Public Policy and Professional Affairs] Greg O’Neill on a new strategic plan for the National Academy on an Aging Society. A few of the coalitions with which we interact are the Leadership Council of Aging Organizations (LCAO), the Alliance for Balanced Pain Management, the Patient Access to Pain Relief Coalition, the Adult Vaccine Access Coalition, the Alliance to Advance Patient Nutrition, Defeat Malnutrition Today, the Eldercare Workforce Alliance, Leaders Engaged in Alzheimer’s Disease, and, of course, FoNIA.

Brian: Before we get into FoNIA’s meeting with NIA Director Hodes, let’s share a quick update on the budget and appropriations process, which is a mess again this year!

Trish: Well, as you know, the House and Senate leadership had planned on going back to the “regular order” by passing budgets, coming to agreement on a compromise, and then moving on to pass the 12 appropriations bills through the subcommittees and full committees, but it looks like they have run into serious challenges again this year.

Brian: How about the budget?

Trish: It looks like Speaker [Paul] Ryan will need most of the fiscally conservative Republicans to get the budget (that was passed by the Budget Committee) through the full House, but that is looking more and more unlikely.

Brian: Yes, that’s what I am hearing on the Hill. I was recently up on Capitol Hill meeting with appropriations staff advocating for funding for the GWEPs [Geriatric Workforce Enhancement Program] in Title VII of the HRSA [Health Resources and Services Administration] budget. As you know, the LCAO, the Health Professions and Nursing Education Coalition, and the Eldercare Workforce Alliance (of which GSA is a co-convener), recently sent letters to the appropriators requesting additional funding for the GWEPs. Staff, however, are not confident that there will be a budget passed or that the Labor, Health and Human Services, Education, and Related Agencies appropriations bill will pass this year as a separate bill.

Trish: Yes, a continuing resolution is already being talked about to keep the federal government going from the end of September until after the elections. In terms of the FY 2017 NIH budget, this year the White House requested an increase of more than $825 million, including funds for Vice President Joe Biden’s national cancer “moonshot,” which may affect funds available for other NIH/NIA priorities. As you know, we were very pleased that the FY 2016 omnibus appropriations bill provided NIA with a decent bump up of more than $394 million. One issue that has come up this year is the use of mandatory funding of NIH in the budget. There are congressional members who do not like that because it takes control of appropriations away from them. Another ongoing issue is the tough competition for limited resources. There are many worthy research initiatives: Alzheimer’s disease, the cancer moonshot, and the BRAIN (Brain Research through Advancing Innovative Neurotechnologies) Initiative, to name a few.

Brian: Can you tell GSA members a little more about FoNIA?

Trish: FoNIA supports and advocates for the research and training missions of the National Institute on Aging. We are a broad coalition
of organizations committed to the advancement of scientific research that could affect millions of older Americans. Members include professional membership organizations, patient advocacy organizations, and universities interested in aging research.

Brian: What was the mood at the FoNIA meeting with the NIA?

Trish: Director Hodes and his leadership team talked about NIA funding and the effect it has had on scientists and research projects. In constant dollars, funding has been sub-inflationary for years. The FY 2014 recovery act did provide additional funds for NIA, but its appropriations are still below where they were a decade ago. Hodes spoke a lot about trying to recruit new scientists to the field ... not just in the fields of Alzheimer’s disease and related dementias.

Brian: I heard something that GSA President Nancy Morrow-Howell recently said on the topic of new scientists: “NIA funding is particularly critical for promising new scientists focusing on issues related to health, mental health, and social issues for older adults. They must be encouraged to develop their aging research agendas. Further, mid-career geriatric researchers need support to continue their focus. We will not succeed in attracting and keeping talented researchers and educators without adequate resources from the NIA ... and we can’t afford this in the face of population aging.”

Trish: I believe that Director Hodes gets that, and recently when FoNIA members had an opportunity to talk to Dr. Collins, the NIH director, I advocated for continued funding toward new researchers and junior researchers in the field. Another area where GSA members have been distraught over the recent years has been the result of cuts in awards, both active awards and new awards, in order to keep new funding available. So the pay line has been cut even after imposing significant administrative reductions of 18 percent. Fortunately, the 2016 funding policy is different because of a 4.2 percent increase in the NIA general budget beyond the $350 million in additional Alzheimer’s disease funds. This should allow NIA to honor their “commitment — paying non-competing awards at their full level,” according to Robin Barr, who serves as the director of the Division of Extramural Activities at the NIA. This should help current grantees actually accomplish what they had proposed to do when they crafted their budgets. Barr adds in his April blog that, “Still, it is good news for some. Within the general allocation we have pushed the pay line for applications under $500k to the 9th percentile. That now rises a little above 2015’s 8th percentile year of misery. We are continuing to reach out to early-stage and other new investigators, even more than in earlier years, in these tight times, and are supporting R01 applications from early-stage investigators to the 19th percentile, and from other new investigators, to the 17th percentile. If you are seeking more funds from us ($500k and over) then you need to work a little harder, and do a little better in review, as we subtract three points from each line if your application’s costs rise to the $500k threshold and beyond.” GSA members may want to look at Robin Barr’s blogs [1.usa.gov/1MWwtTTR] for more on this and the NIA funding policy statement for 2016. NIA has provided a chart on the pay line as well.

Brian: It sounds to me like there needs to be continued regular communications like this on the intentions of the NIA.

Trish: Yes, that helps. Our active participation in FoNIA and our development of the Professional Affairs Department here at GSA will further drive efforts. Director Hodes recently shared in a blog post that the NIA’s 2016 “Aging Well in the 21st Century: Strategic Directions for Research on Aging” document is now available online [bit.ly/1SHPNml] and should be seen as a guidepost for scientists regarding the NIA’s priority areas. They have organized their efforts into functional areas: understanding the dynamics of the aging process; improving the health, well-being, and independence of adults as they age; and supporting the research enterprise.

Brian: I understand that there is a new public-private partnership funding opportunity to re-accelerate biomedical research. Could you say something about this?

Trish: Yes, it’s called OnPAR, which stands for Online Partnership to Accelerate Research. It is a non-government effort to give research projects an opportunity to be funded by private foundations ... like a second chance for referring unsuccessful (not funded) grant applications to others. They had a soft launch March 1. Science magazine recently did a piece on the project and they need to get the word out to other funders regarding the approximately 40,000 proposals that are rejected by the NIH each year.

Brian: That sounds like a promising idea. Another bright spot for those of us in the field of aging was the passage and signing of the Older Americans Act Reauthorization of 2016 after more than five years of advocating and waiting.

Trish: It is a bright spot, especially since traditionally, aging issues tended to be addressed in a bipartisan manner. Now, the Congress can point to something positive that they have accomplished together. Now if we can just get an appropriations bill that we can take to the bank...

Brian: Trish do you have any closing thoughts for GSA members?

Trish: I know that is a softball question since we have been talking so much lately about making sure that every member of Congress knows the importance of what our members do in their states and districts. So, I want to remind all our GSA members that they can really help their own work by reaching out to congressional representatives (House and Senate) and letting them know you want them to support NIH/NIA funding increases. Please consider inviting members of Congress to come to your clinic or university or workplace to hear about your work, see your laboratory, and learn about the importance of your work to the community and the field. Members of Congress need to be reminded that great innovations in science and research are taking place in their states and districts. Also, folks should look at the list of members of the House and Senate Appropriations Committees and see if one or more come from their state and contact them too.

Brian: I am glad that I have another ally in this advocacy effort! Trish: All of us do need to be advocates, that’s for sure. Brian, thank you for your work for GSA and for interviewing me.
Japan, Sweden Partner on Aging-Related Policies
At the 6th Japan-Sweden Joint Committee on Cooperation in Science and Technology, held in February in Tokyo, representatives from the two countries discussed progress made by Japan’s Science and Technology Agency and the Swedish Governmental Agency for Innovation Systems. Both groups are preparing new joint calls aiming at tackling the issues of aging societies — to be achieved by combining expertise and resources of academia and industry in both countries to stimulate innovations with the potential to make community design and services better adapted to the needs of older people.

U.S. Population Aging Slower than Other Countries, Census Bureau Reports
Worldwide, the 65-and-over population will more than double to 1.6 billion by 2050, according to “An Aging World: 2015,” which can be downloaded at 1.usa.gov/1UqN6Jr. This new report from the U.S. Census Bureau examines the continuing global aging trend and projected growth of the population age 65 and over, with an emphasis on the differences among world regions. In 2015, 14.9 percent of the U.S. population was 65 or over. “The United States was the 48th oldest country out of 228 countries and areas in the world in 2015,” said Wan He, PhD, a demographer on population aging research at the Census Bureau. “Baby boomers began reaching age 65 in 2011 and by 2050 the older share of the U.S. population will increase to 22.1 percent. However, the U.S. will fall to 85th because of the more rapid pace of aging in many Asian and Latin American countries.” Japan is the current oldest country in the world and will likely retain that position in 2050. “However, South Korea, Hong Kong, and Taiwan are projected to overtake Germany, Italy, and Greece for second, third, and fourth place by 2050,” he said. Some countries, including China, India, Indonesia, Brazil, Colombia, and Cuba, will experience a quadrupling of their oldest-old population (those age 80 and over) from 2015 to 2050. While Europe is still the oldest region today and is projected to remain so by 2050, aging in Asia and Latin America has accelerated in recent decades. Asia is also notable for leading the world in the size of the older population with 341 million people 65 and older. On the other hand, Africa remained young in 2015, where only 3.5 percent of the total population was 65 and over. Other highlights include employment, retirement, life expectancy and health, fertility, and long-term care.

ICHOM Unveils Benchmarking Program
The International Consortium for Health Outcomes Measurement (ICHOM) has launched the first-ever Global Health Outcomes Benchmarking (GLOBE) Program, aiming to provide risk-adjusted, international benchmarks on health care outcomes by medical condition. The GLOBE Program will create a central place where data, collected in accordance with the ICHOM standard sets, are securely compiled. Thirteen sets on specific conditions have been completed. They include dementia, coronary artery disease, cataracts, Parkinson’s disease, localized and advanced prostate cancer, low back pain, depression and anxiety, cleft lip and palate, macular degeneration, lung cancer, stroke, and hip and knee osteoarthritis. There are many others that are in progress. A complete reference guide that provides an overview of the ICHOM standard set, including definitions for each measure and selected instruments, time points for collection, and associated risk factors is available To learn more, visit www.ichom.org/medical-conditions/.

Zanzibar Establishes Pension for Older Citizens
The first government-funded universal pension in East Africa has been created in Zanzibar. Older men and women over the age of 70 will receive a monthly non-contributory pension of tsh 20,000 ($9 USD), pegged to the cost of an essential basket of goods. “The universal pension in Zanzibar is welcome news for East Africa,” said Amleset Tewodros, the country director for HelpAge International Tanzania. “This pension income will go a long way to improving the health of older people once the free health care policy is fully and effectively implemented,” added Tewodros. According to HelpAge International, findings show that the majority of older people have never been in the formal labor market and therefore do not receive a pension from the Zanzibar Social Security Fund. They did not have any other source of income despite facing a range of health and disability challenges. Prafulla Mishra, a regional director of HelpAge International, said, “The introduction of a universal pension in Zanzibar is a welcome step towards building a social protection floor in the country, in line with the International Labour Organization’s recommendation 202. We are hopeful this will create an opportunity for other governments in the region to learn from and emulate.”

Continued from page 1 – GSA Partners with WHO on Journal Supplement
capacity, and supports the development of environments that are age-friendly as well as improving measurement, monitoring and research on healthy aging.

The journal issue, report, and strategy also emphasize that every older person is different, and acknowledge that one of the key factors driving this diversity is the cumulative impact of advantage and disadvantage across people’s lives.

“The global response to population aging needs to be crafted in ways that overcome, rather than reinforce, these inequities,” said Bustreo. “The type of investments that can be made are broad and the papers in the supplement tackle many of the key issues by looking at the nature of the challenge and what can work to address it.”

The articles in the supplement, titled “Aging — Global Implications for Public Health,” are free to access at bit.ly/GSATG_WHO.
How to Find Work-Life Balance in Graduate School

By Kelly M. Smith

Graduate school can seem daunting and may leave you feeling like you are spinning your wheels with nothing to show for your time. I’ve spoken with many who admit that graduate school is not what they thought it was going to be. If this is you — please pay attention — you are not alone! Whether you are transitioning from undergraduate studies or from a working environment, graduate school can seem to take on a life of its own. However, with realistic goal setting, good organizational skills, and taking care of yourself, you can do it.

First, I think it’s important for us to recognize that graduate school is somewhat of a rare beast. Often the term student is perceived as a position that is “easier than real life.” Entering graduate school, we may have a preconceived notion that our learning environment will be much like our undergraduate studies. No wonder it’s such a shock to our system! I recently came across an online article from *Psychology Today*, titled “Five Truths About Graduate School that Nobody Tells You” by Nathaniel Lambert, PhD, which I found very illuminating.

Lambert suggests using the term “school” in the context of graduate studies is perhaps a misnomer as it is actually a professional apprenticeship. In other words, on day one of graduate school, our career begins as we train to become productive independent researchers which requires a shift from a student mentality to a professional one. This alone can cause dissonance because we still think of ourselves as students. I mean, we are in school right? Wrong — we are in the first phase of our research career.

Defining graduate school as work is the first step and a necessary one in order to set clear boundaries between work and life. Perhaps you have set a targeted completion date for your graduate program. That is great! However, keep in mind that life happens and sometimes we have to shift our focus so be sure to set incremental goals (weekly, monthly, by semester) as small successes are a must. That is great! However, keep in mind that life happens and sometimes we have to shift our focus so be sure to set incremental goals (weekly, monthly, by semester) as small successes are a must in this long journey. As part of your graduate school career, you may be teaching, taking classes and conducting research at the same time which makes for a very full workload. Consultation with your major advisor can assist with setting rational and realistic goals for your work.

Once you have set goals, create a schedule for time that you will devote to your graduate studies and all other activities/responsibilities that you have during a typical week. You may be juggling family life, caregiving, volunteer work, etc. Be sure to include all of this into your schedule. Carefully assess how your time is spent and consider removing any non-value added activities from your schedule. Clearly, familial responsibilities cannot be eliminated. However, if you have non-value added activities that suck up your time, consider limiting the number of hours spent and/or postpone involvement until your graduate work is complete. It is better to do a few things well than to do many things haphazardly.

Finally, be sure to schedule time for yourself! This is the single most important item on your schedule and you should cherish and protect it. Too often, graduate students skip meals, exercise, and sleep in hopes of finishing a product. Relax; it will be there tomorrow. I can assure you that no one is going to swing by in the middle of the night and write that computer program or make those tedious edits for you. (I’ve prayed for it, believe me!) Failure to take time for yourself actually makes you counter-productive and may lead to burnout. If you feel that you are on the brink of burnout, reach out to other graduate students, family members or friends. More often than not, you will find someone who can relate to what you are going through and offer support. Sometimes, just feeling like you are not alone in your journey can make all of the difference in the world.

For more helpful information on balancing work and life, visit www.geron.org/webinar to view the archived February 26 webinar titled “A Balancing Act: Navigating Work and Life in Early Career” presented by David Kaplan, PhD.

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Continued from page 1 – Campaign Spurs Intergenerational Action on Immunizations

Generations United. “This campaign aims to bridge the push for immunizations within segmented groups, such as infants and elders, into an intergenerational conversation within families and among different generations.”

Since January, the campaign has reached more than 14 million people through press releases, an interview with NPR, and social media posts. In March, the partnership expanded to welcome the American Academy of Pediatrics. This addition rounds out the lifespan approach to vaccinations that the campaign partners hope to achieve.

GSA’s work around vaccinations has grown in the last five years as a result of its National Adult Vaccination Program (NAVP). In late 2015, the Society introduced Immunization Champions, Advocates, and Mentors Program Academies, which are regional meetings designed to equip health care professionals to champion adult immunization practices in their health systems.
The Election Results

GSA Congratulates the following candidates on the conclusion of the 2016 A...

Society-Wide

President-Elect
David J. Ekerdt, PhD

Treasurer-Elect
Suzanne R. Kunkel, PhD

Behavioral and Social Sciences Section

Chair-Elect
Merril Silverstein, PhD

Member-At-Large
Helene H. Fung, PhD

Member-At-Large
Nancy L. Pedersen, PhD

Member-At-Large
Linda Ann Wray, PhD

BYLAWS CH

In addition to the officers, members will approve a revised GSA bylaws document. As a result, Article V has been amended such that the composition of the Humanities and Social Science Section will now include current and past chairs, as well as a 14-member...
Results Are Here!

Candidates who will take their offices at the Annual Scientific Meeting.

Biological Sciences Section

Chair-Elect
Kelvin J. A. Davies, PhD, DSc, FRSC

Health Sciences Section

Chair-Elect
Theresa A. Harvath, PhD, RN, FAAN

Social Research, Policy, and Practice Section

Chair-Elect
Marla Berg-Weger, PhD, LCSW

Emerging Scholar and Professional Organization

Chair-Elect
Shoshana (Shani) H. Bardach, PhD

Secretary
Catheryn S. Koss, JD, MA

Communications Chair
Salom Teshale, MA
Careers in Aging Week increases the awareness and visibility of gerontology-related vocational opportunities. It is sponsored every April by GSA and its educational unit, the Association for Gerontology in Higher Education (AGHE). Universities and colleges participate by hosting events at their schools or in their communities. These activities may include guest speakers, career fairs, poster sessions, video presentations, panel discussions, and receptions. GSA and AGHE would like to thank the participating institutions and commend the imaginative ways they promoted gerontology on their campuses.

**Spread the word!**

The gerontology community has been asked to help spread the word why they choose to work with older adults. Nearly 200 people have participated so far in a social media campaign to share their messages. Below are some of the most inspiring entries!

**I Choose to Work with Older Adults Because...**

- "My grandparents always cared about me and now I can give back to their generation."
- "I want to help them as they helped me & others."
- "One day I hope they choose to work with me!"
- "They need advocates!"
- "They are our history and future."
- "I am an older adult (in the making)."

View more pictures from Careers in Aging Week events held at other institutions on GSA’s Facebook page. The photo album is available at bit.ly/CIAW16

**Congratulations to the Recipients of the 2016 Careers in Aging Week Awards!**

These awards provide $400 to support events that raise the awareness about the exciting opportunities that careers in aging provide.

- Bloomsburg University of Pennsylvania
- Eckerd College
- Kansas State University
- Montclair State University
- Saint Louis University
- St. Cloud State University
- The Pennsylvania State University
- Towson University
- University of Missouri, Kansas City
- University of Southern California
- University of Utah
- University of Wisconsin, Madison
- Western Illinois University
- York College of Pennsylvania
- Youngstown State University

GSA and AGHE gratefully acknowledge the John A. Hartford Change AGEnts Initiative for providing grant assistance for Careers in Aging Week awards. Careers in Aging Week is supported by the GSA Innovation Fund.
AN IN-DEPTH LOOK
York College of Pennsylvania
Submitted by Mary Ligon, PhD, CTRS

The goal of the 2016 Careers in Aging Event at York College of Pennsylvania was to bring generations together and raise awareness of the diversity of careers in aging. We invited students, older adults, and professionals in aging careers to come together for a screening of “CyberSeniors,” which is a documentary featuring an intergenerational program where teenagers teach older adults about using the Internet. The film shows the benefits of bringing generations together, and the audience felt those same benefits as we watched. Differences that were so apparent as people arrived at our event began to fade away as we laughed and experienced the film together.

What are the elements of a successful event?
In order to be successful, an event needs to have a clear goal, careful planning, incentives, a marketing plan, and follow through. The gerontology class took responsibility for planning and organizing the event. We applied for the Careers in Aging Week grant and were thrilled to be selected! Because the goal was to bring generations together, we had to look at the needs and interests of all potential participant groups. We had incentives to participate which ranged from accessible parking to movie popcorn and candy, from extra credit to enticing door prizes. A Kindle Fire was the grand prize. We advertised using multiple methods such as flyers, newsletters, and class announcements. Lastly, there was a strong commitment to making connections and giving the best possible experience to the guests.

How do you see your specific events supporting careers in aging?
Students who participated in our event learned the differences and similarities between generations and came away with increased sensitivity toward older adults. Likewise, older adults and professionals had the opportunity to get to know and appreciate the students. The event provided students with a valuable opportunity to network and explore various ways to apply their degrees. It was a great way for them to improve their communication skills by actively engaging with older adults and professionals.

What are the benefits of hosting an event?
A huge benefit of hosting a Careers in Aging Week event is that it can create and/or enhance relationships between professionals, students, and older adults. It can show students that having a career in aging is rewarding and that there are a variety of career paths! We found that the best benefit of our Careers in Aging Week event was that we were able to connect the generations and explore careers in aging while having fun together.

Visit www.careersinaging.com to sign up for e-mail alerts and more information!

Make sure your institution’s offerings are listed in AGHE’s Online Directory of Educational Programs in Gerontology and Geriatrics! This is a resource that allows users to browse programs by numerous criteria such as location and type of degree, certificate, or fellowship offered. There is no cost to browse or search the online directory, nor is there a fee for educational institutions to submit and maintain their listing.

For more information, visit www.aghedirectory.org
Federal Monies Slated for Research on Changes in Emotion Processing

The National Institute of Mental Health and the National Institute on Aging have issued two funding opportunity announcements related to emotion regulation research, under the R01 and R21 funding mechanisms. The agencies are inviting applications for mechanistically oriented, exploratory, and developmental research on how age- and sex-related changes in emotion processing develop over the adult life course and how these changes may interact with and inform the understanding of affective dysregulation in adult mental disorders and Alzheimer’s disease. In particular, research is sought that will leverage the already established normative backdrop of generally improved emotion regulation with aging, as well as research that will expand this evidence base. One aim is to clarify the trajectories of change in emotion processing and linked neurobiological and neurobehavioral factors in aging adults who experience mood and anxiety disorders. Equally important aims are to advance understanding of the factors involved in normative maturational shifts in these processes and of sources of individual variation therein, and to clarify how such shifts (or lack thereof) may relate to irregularities in the integrative neural-behavioral mechanisms of affect regulation seen in these adult mental disorders and in Alzheimer’s disease. It is anticipated that such studies may identify novel targets for mental health interventions or prevention efforts, or provide clues as to which available intervention strategies might be optimally applied to normalize emotion dysregulation or to strengthen emotional resilience at different stages of the adult life cycle. Letters of intent are due June 22 and applications are due July 22. Information for the R21 grant can be obtained at 1.usa.gov/1N4cRHR; to learn about R01 opportunity, visit 1.usa.gov/1VmQmEE.

NIA Funds Target Systems Biology of Aging

The National Institute on Aging (NIA) has posted a funding opportunity announcement that encourages research projects with the potential to develop networks of aging using lifespan as the observable phenotype. In addition to constructing aging networks, two further important goals of this announcement are determining what properties of an aging network change across the lifespan; and using aging networks to generate and test hypotheses about fundamental questions in the biology of aging that are more likely to be answered using systems biology than by single-gene approaches. Research proposed in applications responding to this announcement will utilize either the single-cell organism Saccharomyces cerevisiae or the multicellular organism Caenorhabditis elegans, both of which have been used extensively for genetic and molecular studies on aging. Applications must include a contact principle investigator/project director who is an expert in systems biology, and others should have expertise in the biology of aging and/or necessary high-throughput technologies using the laboratory organism for study (s. cerevisiae or c. elegans, only). Letters of intent are due September 7 and applications are due October 7. Visit 1.usa.gov/1pBKyLK to learn more.

NIA Grant Focuses on Aging Phenotypes in Rodents

Through a new funding opportunity announcement, the National Institute on Aging (NIA) is seeking to advance research on the underlying basis for the transfer (or transposition) of aging phenotypes observed between young and old rodents and discovered through heterochronic parabiosis. Examples of transposed phenotypes include reversal of cardiac hypertrophy, partial restoration of cognitive function, improved vascularization, and repair of skeletal muscle after cryo-injury (anti-geronic transposition), or as accelerated loss of cognitive function and neurogenesis (pro-geronic transposition). Other transposed phenotypes, as revealed solely through heterochronic parabiosis, may also be reported in the literature. There are also reports of candidate factors found in circulation that might be causally related to the transposition of these aging phenotypes; these are termed “circulating geronic factors.” To date, these are proteins and peptides that pass between the young and old mice joined by parabiosis, due to anastomosis of their circulatory systems. Based on these novel findings and this novel experimental paradigm, the specific objective of this funding opportunity is to test whether these candidate geronic factors are necessary for the transposition of aging phenotypes. The focus is on phenotypes transposed in heterochronic parabiosis and the candidate factors which are present and functional at physiological concentrations in circulation. Letters of intent are due January 2, 2017, and applications are due February 2, 2017. Further information is located at 1.usa.gov/26hjLVL.

NIH Will Support Brain, Nervous System Disorders Research

The National Institutes of Health (NIH) and several participating organizations have a funding opportunity announcement that encourages exploratory/developmental research grant applications, proposing the development of innovative, collaborative research projects on brain and other nervous system function and disorders throughout life, relevant to low- and middle-income countries (LMICs). Scientists in the U.S. or upper middle income countries (UMICs) are eligible to partner with scientists in LMIC institutions. Income categories used are as defined by the World Bank at data.worldbank.org/about/country-and-lending-groups. These grants are expected to inform the development of more comprehensive research programs that contribute to the long-term goals of building sustainable research capacity in LMICs to address nervous system development, function and impairment throughout life and to lead to diagnostics, prevention, treatment and implementation strategies. The proposed work may also contribute to developing a base for research networking and evidence-based policy beyond the specific research project. The last application due date for this FOA is January 5, 2017. All details can be found at 1.usa.gov/1PAiovh.
The Ins and Outs of Building graphs. The Editorial Board hopes these pieces will encourage JG:SS articles in easy-to-read bulleted points and straightforward graphs. The Editorial Board hopes these pieces will encourage

New JG:SS Briefs Examine Policy Implications

The Journal of Gerontology: Social Sciences (JG:SS) has unveiled a new feature called Policy Snapshots. It features one-page briefs that summarize the key findings and policy implications of recent JG:SS articles in easy-to-read bulleted points and straightforward graphs. The Editorial Board hopes these pieces will encourage

Cornell’s Translational Research Institute on Pain in Later Life (TRIPPL) presents

Mobile Health, Pain & Aging
a free 2016 webinar series

May 23rd | 3pm–4pm EST: A Design Research Approach to Geriatric Care, George Edward Torrens, PhD, and Tom Page, PhD, MPhil, Loughborough University

June 27th | 3pm–4pm EST: The Ins and Outs of Building mHealth for Older Adults, Kelly Grindrod, PharmD, MSc, University of Waterloo

June 27th | 3pm–4pm EST: The Ins and Outs of Building mHealth for Older Adults, Kelly Grindrod, PharmD, MSc, University of Waterloo

July 25th | 3pm–4pm EST: mHealth tools for older adults: usability and possible aging barriers, Gaby Anne Wildenbos, MS, MA, University of Amsterdam

Register at goo.gl/viHVNT or contact zsg2001@med.cornell.edu

Report Provides Guidance for Art’s Role in Healthy Aging

The National Endowment for the Arts (NEA) and the National Center for Creative Aging (NCCA) recently released a report from the 2015 Summit on Creativity and Aging, which offers recommendations for the public and private sectors, noting that the federal government is poised to take a leadership role in fostering change. The report investigates three topics relevant to healthy aging: health and wellness and the arts, lifelong learning in the arts, and age-friendly community design. It includes recommendations for work to eliminate ageism across all federal policies in the arts, healthcare, education, and community design; federal funding of interdisciplinary research and collaborations to expand the evidence and in turn support funding and policy; more federal incentives for the private sector; private sector incentives to encourage the creation of high-quality programs and services in the arts and design to meet growing demand from people living longer, healthier lives in communities of their choice; and collaborative public-private leadership among public and private arts, aging, health, and community service organizations. A webinar to discuss the report has been archived in the webinar section at arts.gov. To view the full report, visit 1.usa.gov/1VopwNw.
UAS Zurich to Export Continuing Education in Nursing to China

In order to address the increase in the number of older people in China and consequently the number of individuals who are diagnosed with dementia, the University of Qingdao has established a training cooperation with the Institute of Nursing at the Zurich University of Applied Sciences (UAS Zurich). The aim is to jointly establish a continuing education program in gerontological nursing in China. This cooperation breaks new ground for both parties, with the UAS Zurich offering for the first time in its history a continuing education program to China. The existing course in Switzerland, which leads to the Diploma of Advanced Studies in Gerontological Nursing, has been adapted to address the conditions of older people in China. In addition, participants acquire the skills to guide and train other nurses so that their enhanced skills and knowledge will be shared. In this cooperation, the Institute of Nursing at the UAS Zurich will also gain knowledge about nursing and health care in China. For the Medical School at the University of Qingdao, it is a new approach to offer an on-site continuing education program for nurses. In the last part of the course, the Chinese registered nurses will complete a clinical placement in Switzerland. Overall, the diploma course in gerontological nursing will take 18 weeks, spread out over 18 months, to complete. The course will be held in German with simultaneous interpretation into Mandarin. The course is aimed at registered nurses working in geriatric departments of the University Hospital and regional nursing and retirement homes.

CCSU Expands Gerontology Options for Graduate Students

Central Connecticut State University (CCSU) is developing new graduate level programs to augment its undergraduate gerontology minor. Gerontology students will be able to apply information they have learned in the classroom and skills learned through internships to a variety of roles within organizations that serve older adults. At the graduate level, there is a new specialization in gerontology counseling option for practicing counselors and clinicians who hold a master's degree in counseling, marriage and family therapy, or in psychology, who are pursuing the Advanced Official Certificate Program in Professional Counseling. CCSU is also developing a graduate certificate in gerontology. Additional information on CCSU's graduate programs can be found at www.ccsu.edu/grad and more information on the gerontology minor at www.ccsu.edu/gerontology.

Radford University Offers Interdisciplinary Graduate Certificate Program

Radford University will soon offer a Graduate Certificate in Gerontology, its first-ever multi-disciplinary graduate-level certificate. The program was approved by the State Council of Higher Education for Virginia in December 2015 and enrollment is underway now. The program will prepare graduate students for the evolving field of collaborative care and service to geriatric patients or clients. The 15-credit hour certificate, an add-on program to a disciplinary degree, will be awarded after completion of an interprofessional framework of courses reflecting biological, psychological, sociocultural, and therapeutic aspects related to the functional challenges faced by individuals as they age. Two years in development, the program is the product of the Interprofessional Gerontology Consortia (IGC), chaired by GSA Fellow Virginia Burggraf, DNS, RN, FAAN, the university's Marcella J. Griggs Distinguished Professor in Gerontological Nursing. The IGC brought faculty together from the Colleges of Business and Economics, Education and Human Development, Visual and Performing Arts, and Humanities and Behavioral Sciences, as well as the Waldron College of Health and Human Services. Among the disciplines engaged in the certificate’s development were nursing, business, occupational therapy, music therapy, physical therapy, counselor education, social work and psychology. For more information about Graduate Certificate in Gerontology program, contact the College of Graduate and Research Studies at www.radford.edu.
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