14 Journalists Earn Aging-Focused Reporting Fellowships

GSA and the Journalists Network on Generations are welcoming 14 distinguished reporters for the next cohort of the Journalists in Aging Fellows Program, now in its 10th year. They represent a wide range of general audience, ethnic, and community media outlets, including public radio and television affiliates, daily newspapers, and national publications. This year’s group brings the program’s total number of participating reporters to 170. The new fellows were chosen — by a panel of gerontological and editorial professionals — based on their proposals for an in-depth aging-focused story or series.

These projects, to be produced in 2020, span such concerns as cultural challenges in the U.S. for older Arab, Indian, and Latino immigrants; health issues for African American and other long-held prisoners on reentry to the community; continuing struggles of low-income older Puerto Ricans in the wake of the 2017 hurricanes; increasing homelessness among older adults on Cape Cod; challenges to ageist stereotypes; and the crisis of loneliness and isolation.

The participating journalists will convene during GSA’s 2019 Annual Scientific Meeting — scheduled for November 13 to 17 in Austin, Texas — where they will have access to the latest aging research and approximately 4,000 expert attendees. The fellows program is supported by funding from The Silver Century Foundation, The Retirement Research Foundation, The Commonwealth Fund, and The John A. Hartford Foundation.

“This program is unique in that it not only

Continued on page 6

GSA Contributes to OAA Reauthorization Efforts

Via press release and social media, GSA recently applauded the House Committee on Education and Labor on its passage of H.R. 4334, the Dignity in Aging Act of 2019, which would reauthorize the Older Americans Act (OAA). H.R. 4334 is expected to be voted upon by the full House of Representatives in the near future, while the Senate continues to work on its reauthorization bill.

GSA has been a strong advocate for the reauthorization of the OAA, which is essential to developing, coordinating, and delivering home and community-based services that help older adults age with independence in their homes and communities.

“We are pleased to see strong bipartisan support for programs and services that are critical for millions of older adults, their families, and caregivers, and have allowed them to live more active and productive lives,” said GSA CEO James Appleby, BSPharm, MPH, ScD (Hon).

“GSA is proud to have been part of the collaborative process in developing language for the new bill and hopes that the House and Senate will move quickly to reauthorize the OAA.”

H.R. 4334 was cosponsored by Subcommittee on Civil Rights and Human Services Chair Suzanne Bonamici (D-OR), Ranking Member James Comer (R-KY), and Representatives Elise Stefanik (R-NY), Susie Lee (D-NV), Susan Wild (D-PA), and Dusty Johnson (R-SD).

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From the CEO

As Many Dwell on Divisions, Science Bridges and Unites

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

The annual United Nations General Assembly has just wrapped up, and it remains to be seen if the global community will be able to find ways to meaningfully address major challenges such as climate change, threats to human rights, and pandemic disease. Likewise, it is uncertain how global bodies will advance policies to help maximize the human capital represented by aging societies.

Fortunately, there’s another international gathering of experts in a few weeks that inspires me with much greater confidence — the GSA Annual Scientific Meeting. It’s a shining example of what people can accomplish together when united by a common mission, regardless of national origin. GSA continues to be respected throughout the world as a champion for aging science, advancing aging research, education, and practice through the work of our 5,500 members.

Currently, about 15 percent of GSA’s members are based outside the U.S. And we can expect a similar (or larger) proportion of attendees at the 2019 Annual Scientific Meeting in Austin. This year, about 22 percent of main abstract submissions were from GSA member scholars in 42 countries around the world.

Given GSA’s international reach, the Society has been active in building bridges with scholars and institutions in other countries, with China providing possibly the best examples of our global partnerships.

Just last month, GSA President-Elect Kathryn Hyer, PhD, MPP, FGSA, led a delegation of members to the Eighth Chinese Congress on Gerontology and Health Industry in Jinan, the capital of China’s Shandong Province. Following the tradition of GSA presidents for several years running, Dr. Hyer delivered one of the keynote lectures at the Congress, gave talks at several local universities, and met with administrators there to discuss possible future collaborations.

Previous such meetings have produced promising results. GSA President S. Michal Jazwinski, PhD, FGSA, led the Society’s delegation to the Chinese Congress last year, and we’re seeing the benefits now. Dr. Jazwinski met with the president of Shandong University along with a few other school leaders. Both parties showed a lot of interest in collaborating, and as a first step, Shandong University Professor Nengliang “Aaron” Yao, PhD, will be leading the International Workshop on Home Care Medicine at GSA’s Austin meeting. In addition, the university will have a booth in the Exhibit Hall, becoming the first academic institution from China to do so.

Attendees in Austin can also look forward to the annual East Meets West Symposium. This year, it’s titled “Improving Health and Long-Term Care for Older Adults in the U.S. and China,” and is being co-organized by GSA and the Chinese Association of Gerontology and Geriatrics, with the presidents of both organizations giving opening remarks.

Beyond the GSA Annual Scientific Meeting, exploratory conversations with other colleague organizations in China resulted in a training partnership between GSA, the China Health Promotion Foundation, and the National Geriatrics Center. In late August, GSA cohosted the Sino-American Training Course for Long-term Care Trainees for the Elderly in Beijing, China. Representing GSA and serving as lecturers were former President Barbara Resnick, PhD, RN, CRNP, FAAN, FAANP, FGSA, and Elizabeth Galik, PhD, CRNP, FAAN, FAANP, FGSA.

I believe that advancing quality research and nurturing the unrestricted exchange of scientific ideas are essential to addressing the global issues we face. Aging knows no borders. In Austin, you’ll see the many virtual bridges, not walls, being built between aging researchers around the world. Join us!

James
New Books by Members

• “Senior Cohousing: A New Way Forward for Active Older Adults,” by Sherry Cummings, MSW, PhD, FGSA, and Nancy Kropf, MSW, PhD, FGSA. Published by Springer, 2019.

Members in the News

• Anne B. Newman, MD, FGSA, and S. Jay Olshansky, PhD, FGSA, were quoted in an August 31 Associated Press story titled “Too old for president? Health and fitness a better question.”
• Frank Lin, MD, PhD, was interviewed for a September 12 NPR story titled “Untreated Hearing Loss Linked To Loneliness And Isolation For Seniors.”

Colleague Connection

This month’s $25 amazon.com gift certificate winner: Bonnielin Swenor, PhD

The recipient, who became eligible after referring new member Kira Baldonado, BA, 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:
Thomas R. Cole, PhD, FGSA
Click on the Member Spotlight slider image at the top of www.geron.org to read the interview and ask questions.

Szanton Receives Heinz Award for Pioneering Work

The Heinz Family Foundation has named Sarah L. Szanton, PhD, ANP, FAAN, FGSA, co-developer of the Community Aging in Place Advancing Better Living for Elders (CAPABLE) program, the recipient of the prestigious 24th Heinz Award in the Human Condition category. CAPABLE provides low-income seniors with handyman services alongside in-home nursing visits and occupational therapy to improve health and mobility, restore dignity and independence, and decrease health care costs. As part of the accolade, Szanton will receive an unrestricted cash award of $250,000. She currently is the Endowed Professor for Health Equity and Social Justice and director of the Center for Innovative Care in Aging at the Johns Hopkins School of Nursing. Established to honor the memory of U.S. Senator John Heinz, the Heinz Awards this year recognized those who have made significant contributions in five distinct areas of great importance to Heinz: Arts and Humanities; Environment; Human Condition; Public Policy; and Technology, the Economy and Employment.

Heyn Takes New Role within Cochrane U.S. Network

Patricia C. Heyn, PhD, FGSA, FACRM, is now the deputy director for the newly formed U.S. Cochrane Collaboration Network University of Colorado Anschutz Medical Campus Center. The Cochrane U.S. Network works to promote evidence-informed decision making in health care in the U.S. by supporting and training systematic review authors and users of Cochrane Reviews, as well as working with clinicians, professional associations, policymakers, patients, healthcare provider organizations and the media to encourage the dissemination and use of Cochrane evidence.

Gravenstein, Appleby Participate in DC Briefing

GSA National Adult Vaccination Program Workgroup member Stefan Gravenstein, MD, MPH, FGSA, and GSA CEO James Appleby, BSPharm, MPH, spoke at a July 24 briefing on Capitol Hill titled “Medicare Part D Beneficiary Access to Immunization — Today and in the Future.” The briefing was organized by the Adult Vaccine Access Coalition, for which GSA Vice President of Professional Affairs Patricia D’Antonio serves as chair. Appleby moderated the session, and Gravenstein was one of four featured presenters. This event focused on how immunizations enable older adults and the chronically ill to live longer and healthier lives and what Congress can do to ensure patients have access to this vital preventive health service.

Tinetti Serves as Capitol Hill Briefing Panelist

On July 29, Mary Tinetti, MD, FGSA, spoke at an Alliance for Health Policy-sponsored briefing in Washington, DC, titled “What’s Next for Patient Experience Measurement?” Tinetti is based at Yale University, where she serves as the Gladys Phillips Crofoot Professor of Medicine (Geriatrics); a professor in the Institution for Social and Policy Studies; and section chief, geriatrics. She is a recipient of GSA’s Donald P. Kent Award, Maxwell A. Pollack Award for Productive Aging, M. Powell Lawton Award, and Joseph T. Freeman Award.

GSA Connect Corner

Below are highlights from recent discussions on the GSA Connect online networking platform. Join the conversation at connect.geron.org!
• Ronica N. Rooks, PhD, FGSA: I’m preparing for a new undergraduate course in Health and Aging (not for fall 2019 though). Instead of using a textbook, I’d like to use OER — exs. videos, podcasts, activities, articles, etc. I’ve been gathering resources this summer, but I wondered if 1) people have some favorite OERs they use and can suggest and 2) anyone has tried creating an open-textbook with students and can describe their process and results with students [i.e., co-creating an anthology of resources with students driving this process, which will be assessed by other students in the course, and expanded/revised over the years in our learning management system]? Thanks for any ideas or suggestions. (Posted in the Academy for Gerontology in Higher Education Interest Group Community)
• Liza Behrens, PhD, RN: Does anyone know of a data set that asks for the MDS Section F preferences and also assesses fulfillment with those preferences? This has been called a preference congruence quality indicator by the National Nursing Home Quality Improvement Campaign (Tracking Tools: https://qiprogram.org/tracking-tools). We trying to figure out how often resident preferences are not fulfilled in nursing home care. (Posted in the Systems Research in Long-Term Care Interest Group Community)
GSA Veteran’s Experiences Yield Valuable Insight on New Policy Challenges

Last month, I wrote about our upcoming Policy Series at the Annual Scientific Meeting in Austin. It seems fitting to spend some time speaking with GSA Public Policy Committee Chair Linda Krogh Harootyan, MSW, FGSA, one of the contributors to that series — this year and for many years in the past.

Linda worked at GSA for 35 years, and I was fortunate to have worked with her for 30 of them. She invited me to participate on a congressional panel at the GSA meeting in 1985, and we have worked on many very rewarding projects ever since. She is a treasured GSA legend. (And should note that she’s also married to current GSA SRPP Section Chair Robert “Bob” Harootyan, MS, MA, FGSA.)

Brian W. Lindberg: Linda, you have a long and distinguished history with GSA and in the fields of gerontology and social work, so let’s start with something else; how are you and Bob enjoying retirement?

Linda Krogh Harootyan: Thinking about and planning what you will do in retirement can be very different from the reality. In our case, it is better than we could have ever imagined. We love Wilmington, North Carolina, and the beautiful environment in which we live. We feel lucky to regularly take bike rides and walks on the beach. We also enjoy having the time to get involved locally through volunteer work. We’ve discovered so many ways to contribute at the local level and are far busier than we ever expected. My advice to others approaching retirement is not to get caught up in the beach. We also enjoy having the time to get involved locally through volunteer work. We’ve discovered so many ways to contribute at the local level and are far busier than we ever expected. My advice to others approaching retirement is not to get caught up in a clear plan, but rather be open to opportunities that you might never have imagined. Embrace the unexplored.

Brian: Retired yes, but you have been quite active as GSA’s Public Policy Committee chair.

Linda: I enjoy chairing the GSA Public Policy Committee and looking for meaningful ways to engage the committee members and to bring greater visibility to the importance of policy. It is critical for researchers and scholars to better understand how their work can help make a difference. Also, one of my favorite aspects of retirement has been getting back to my art background.

Brian: From your perspective now, how do you see the intersection of research, public policy, and advocacy?

Linda: I see the intersection of the three as critical, but, unfortunately, too often absent. I am proud of the policy institute you and I created for the John A. Hartford Foundation Faculty Scholars in Geriatric Social Work Program because it promoted that intersection. The institute was a successful model for educating academics about the importance of engaging in policy and the different ways to do so. Many scholars who participated in the institutes were then motivated to become actively involved in state and national policy issues. The Public Policy Committee and other GSA activities can help further strengthen this link. The Hartford institute is a proven model that GSA could consider reviving.

Brian: What parts of your work at GSA stand out as your favorite accomplishments?

Linda: Overall, I am very proud of my success in helping GSA secure funding for some wonderful and creative ideas, many of which came from members. I enjoyed the many collaborations to bring these ideas to fruition. My three favorite accomplishments are:

• The numerous grants and efforts related to minority aging that resulted in greater visibility and action to move these issues forward in GSA and beyond. We also created a successful Minority Leadership Development program, which became a pipeline for future GSA leaders. I still hear from the participants about how much this program meant to them and their career;

• Creation, in partnership with Paul Kleyman and New America Media, of the Journalists in Aging Fellows Program, which continues to be a major success. It’s a wonderful example of your work; and (2) developing a one-page research summary for policy makers. We suggested two future Public Policy & Aging Report topics to editor Brian Kaskie, as well as ways to repurpose PP&AR content.

In my “other” world, I co-chair the grants committee for our residential community’s foundation, which gives out more than $400,000 a year to local non-profits. I enjoy the opportunity to read the proposals and to visit our grantees and see first-hand the incredible work they are doing. Bob and I also have started a small consulting business. It is a terrific way to work with people and organizations we respect and help them get support for programs that can make a difference.

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• Creation, in partnership with Paul Kleyman and New America Media, of the Journalists in Aging Fellows Program, which continues to be a major success. It’s a wonderful example of
getting research to the public. The reach of the journalists, about half of whom represent minority communities, is in the millions. And, finally;

- The Hartford Faculty Scholars and Doctoral Fellows Programs in Social Work, which ran for more than 20 years and had a major impact on the field of geriatric social work. It will always be near and dear to my heart and was a welcome return to my social work past. Interestingly, one of our former scholars is now director of the School of Social Work at the University of North Carolina here in Wilmington. Another scholar is on the faculty. Working with Barbara Berkman, Jim Lubben, The John A. Hartford Foundation, and all the amazing social workers involved with the programs was an experience I will always treasure.

Brian: What do you think are the critical issues for the field of gerontology today and are we doing what we need to do to tackle them? What is our moonshot challenge?

Linda: Wow, that is daunting question. There are lots of critical issues, but I think health and long-term care are at the top. As the population continues to age, particularly the old old, we will be challenged to have properly trained health providers, caregivers, and social service personnel at all levels to address the growing needs. Despite increased attention during the last decade, we are already behind the curve. How can we catch up? Cost will certainly be a major issue. The moonshot challenge, in my opinion, is Alzheimer’s and other dementias. Lots of resources are being directed to better understanding and potentially preventing or curing cognitive decline and AD. While there has been some movement forward, there are no big payoffs just yet.

Brian: How do you think we can continue to lead and stay ahead of the curve so that our research is relevant to policy makers?

Linda: A single visit or testimony, while important, is not enough. We need to emphasize that building ongoing relationships is critical for making a difference. Researchers can start by doing something simple such as regular communication with their state and federal representatives. Keep policymakers informed when you get grant funding for policy-related research and then follow up with findings and their implications for policy, particularly as it relates to the legislator’s issues of greatest interest. GSA and the Public Policy Committee can help to facilitate the development of these relationships. And, many of the materials developed by you for the faculty scholars policy institute are being updated to help GSA members learn more about the various facets of engaging in policy.

Brian: Our members have their brains in almost every imaginable aging issue, but GSA can’t be directly involved in each one.

Linda: I think GSA can help provide the mechanisms and channels for education and advocacy, but the members must assume responsibility for advocating on their specific issues. The Public Policy Committee and GSA are giving them tools to become savvier about identifying the policy and educational relevance of their work and getting it into the hands of those who can bring about change. I think there is a need for translators who can help broker that connection. GSA is in a key position to take on that role. It really involves creating a mechanism or structure for that to happen. There are certain things in place already that could be expanded for that purpose.

Brian: You must be pleased to know that the ideas in the joint GSA and NCOA white paper on strengthening the Older Americans Act have been included in the House version of the reauthorization bill.

Linda: Absolutely, but it is a good example that change does not happen overnight. That paper, which was written several years ago, was not all that well received when we first wrote it and spoke to Hill staffers. There was greater emphasis on services and little interest in reinserting education and practice into the act. It has taken persistence and patience. Timing is also critical. It also took a team, particularly those who had long established connections and relationships on Capitol Hill.

Brian: Finally, as you look ahead, what do you think of the younger gerontologists that are grappling with the issues of the day?

Linda: I have been excited by the receptivity and excitement of our two ESPO representatives on the Public Policy Committee as well as other ESPO leaders to be more involved in policy. Yes, they have careers that require their attention, particularly at these early stages, but many of them are excited by the opportunity to see their work make a difference. In general, I believe that gerontology has evolved from its earliest stages of development as a discipline to its current status as a strong and important multidisciplinary contributor to both science and policy related to aging. Our youngest scholars, therefore, have more opportunity to be involved in policy-related efforts.

Brian: Thank you so much and we’ll see you in Austin!

Recent GSA Policy Actions

GSA, through the Leadership Council of Aging Organizations, recently signed on in support of several letters to the legislative and executive branches of government. The first supports funding for critical aging programs and services in FY 2020 was sent to House and Senate leadership. GSA also signed on to a letter encouraging Senate appropriators to adopt the funding increases that the House provided for aging programs. GSA then signed on to the comment letter to the Department of Health and Human Services on the proposed rule on Nondiscrimination in Health and Health Education Programs or Activities under section 1557 of the Affordable Care Act — opposing the reinterpretation of the Health Care Rights Law that would result in discrimination against LGBT individuals and those with limited English proficiency. Lastly, GSA signed on to a letter to Senate leadership opposing dropping the U.S. Pharmacopeia safety requirements for biologics.
Continued from page 1 – 14 Journalists Earn Aging-Focused Reporting Fellowships

provides its participants with a first-rate educational overview of trends and new developments in the field, it does so at the country’s largest gathering of researchers on aging,” said Todd Kluss, GSA’s director of communications. “We congratulate the new fellows and their outlets on demonstrating a commitment to serving their communities with fact-based, topical stories on the experiences of people as we age.”

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

“While much of the media continues catering to youth markets, our fellowship program has helped inform the public of the twin stories of aging in America,” Kleyman said. “At this time when we face a looming retirement crisis for elders and their families, our rapidly aging population also offers tremendous contributions to communities and the economy, contributions still to be fully tapped.”

In Austin, the fellows also will participate in a daylong educational workshop, where researchers will discuss new trends and provide insight on key issues facing Americans as they age. Continuing fellowship grants also are being provided to allow six previous fellows to participate in the meeting. A continuously updated list of more than 600 stories generated by the program’s alumni is available at www.geron.org/journalistfellows.

The new fellows:

Hassan Abbas (Arab American News)
Project: Three-part series on intergenerational family relations in the Arab American community of Detroit and Dearborn, Michigan, focusing especially on religious or ethnic affiliations of Arab American subgroups and socio-economic conditions affecting them.

Mayra Acevedo (WIPR-TV Puerto Rico)
Project: Four-part, Spanish language series (captioned in English), plus a half-hour special, on how nonprofits are helping impoverished older Puerto Ricans, many ineligible for benefits because they own homes —including those damaged by 2017’s Hurricanes Irma and Maria.

Tina Antolini (KQED Public Radio’s “California Report”) Project: As part of a documentary series on ageism, an examination of how a group of nuns challenge traditional notions of “successful aging” while living long, meaningful lives interdependently.

Agustin Duran (La Opinión, Southern California)
Project: Three-part series on a retirement challenges for Latinos in Southern California, such as undocumented status, lack of health insurance, being eligible for only small Social Security benefits, and homelessness.

Cecilia Hernandez-Cromwell (Telemundo Noticiero Oklahoma)
Project: Three-part series on the physical and emotional effects of undocumented immigrants’ journey to the U.S., far from home and family; the impact of stress and injuries over years of heavy labor without health insurance; and the toll on caregivers.

Kate Ferguson (Real Health Magazine)
Project: “Aging in Place: Today’s Prison Population,” a two-part series in print and online on health and mental health issues for older prisoners reentering communities and their families, with a focus on model approaches by progressive law-enforcement agencies.

Katherine Ellen Foley (Quartz)
Project: How researchers can better meet the needs of minority older adults, a group historically excluded from clinical dementia research despite their higher-than-average rates of dementia, and the fact that Alzheimer’s disease may manifest differently in people of color.

Judith L. Kanne, RN (Atlanta Senior Life)
Project: Two-part series on combatting elder abuse in Georgia through prevention.

Jon Kelvey (The Carroll County Times, Maryland)
Project: An investigation of how the true cost of living, both for prime-age wage earners and those in long-term care, calls for a more realistic living wage threshold — one that reflects what people need to be earning to ensure independence in old age in today’s reality of wage stagnation and rising costs of basic necessities.

Joanne Laucius (Ottawa Citizen, Ontario, Canada)
Project: Story package with video interviews on increasing loneliness among older adults in Canada and its potential health risks.

Cynthia McCormick (Cape Cod Times, Massachusetts)
Project: Two-part print series package with reporting, sidebars, and profiles, plus a public radio podcast on the disproportionate numbers of older homeless people on Cape Cod and how officials are addressing what is becoming a statewide crisis of housing insecurity for older adults.

Jaya Padmanabhan (India Currents)
Project: “Loneliness and its Linkage to Food for Aging Indian American Immigrants,” underscoring the need for health care services to account for how access to traditional foods affects cultural beliefs and behaviors of older people, particularly in Indian cultures.

Joelle Renstrom (Slate)
Project: A three-part series on the science, practical considerations, and social/ethical implications of radical life extension discoveries, such as emerging “rejuvenation technologies” and how they might promote widening social and cultural rifts.

Luanne Rife (The Roanoke Times, Virginia)
Project: An investigation of whether older Virginians with mental illness or dementia who lack family and funds are receiving appropriate services or are being housed in psychiatric hospitals, despite legal requirements that they be placed in the least-restrictive settings.
Conferencing as an Introvert

By Jacquelyn Minahan, MA

This fall, The Gerontological Society of America will host its Annual Scientific Meeting, to take place November 13 to 17 in Austin, Texas. This is an occasion to connect with colleagues, learn about ongoing research endeavors, and continue engaging with the gerontology community at large. Conferences offer a multitude of opportunities and a chance to meet and network with like-minded individuals. The problem? They are designed for extroverts.

Conferences are challenging for introverts. Large and noisy spaces, continuous interactions with new people, and little space to recharge often leave introverts exhausted and overwhelmed. Hunkering down with room service after a day of meetings is appealing, but some feel guilty about the lack of networking. If the upcoming Annual scientific meeting fills you with equal parts excitement and dread, the below tips may help ensure you get the most out of your meeting time.

1. **Make a plan:** What is it you're hoping to get out of the conference? Are you trying to connect with a few new people? Are there particular sessions you're wanting to attend? Define what a “successful conference” looks like for you and figure out how to accomplish that before going.

2. **Prepare before leaving:** Make sure your introvert battery is charged up before going to the conference. Making self-care a priority before the conference can help you feel energized and ready to conquer the scientific meeting.

3. **Self-care during the conference:** Figure out what you find recharging, and intentionally make time to do this during the conference. Planning this beforehand can ensure that your free time isn’t completely absorbed by conference activities. Research the area around the conference and figure out where you can escape for a few moments between sessions — is there a yoga class or a running route around, if that’s your self-care? Planning an evening or meal alone can also be an easy way to recharge amid the chaos.

   **Note:** The ESPO lounge is a great place to take a quick break in the middle of the conference. This is (usually) a quiet area with refreshments and is only open to ESPO members. The lounge will be located in Show Office 12 on level 3 of the Austin Convention Center, so make sure to stop by to recharge!

4. **Don't feel guilty:** Try not to give into your fear of missing out. This can be the biggest source of exhaustion for introverts. Be gentle with yourself — if you’re feeling as though you need to recharge, take the time to do so and do it intentionally, without guilt. Prioritizing self-care over networking or session attendance may be crucial to ensuring success at the conference. Conference at your pace, your way. If skipping a session (or even a day?) is what is necessary, do that.

5. **Network your way:** Pick a couple of key people or set a networking goal for yourself ahead of time. Don’t feel the stress of needing to introduce yourself to everyone. If you can only handle a few minutes of networking, tactfully provide that information up front (e.g., “I only have a few minutes, but I wanted to introduce myself!”). Focus on one person at a time, rather than a group of people. Also, planning conversation topics ahead of time can reduce the stress of small talk. Try openers such as, “What brought you to the conference?” or “What’s your connection to this topic?”

6. **Plan your lodging appropriately:** If you can afford it, book a single room or share a space with someone that you find recharging, rather than draining. Having a sanctuary to escape to can alleviate some of the exhaustion that accompanies the day. If you can’t afford a single space or are attending with new people, plan your breaks accordingly. Let your roommates know that you’re going back to the room for some space and individual time. Or, if the energy of the conference is exhausting, secure lodging away from the conference. This also provides a way to see more of the local sights (and may be cheaper).

7. **Attend social events you can handle:** Conferences are full of after-hours networking and social events. If attending all of them is exhausting, pick one event to attend. Set a time and networking goal for yourself and give yourself permission to leave after you’ve accomplished them. Be intentional about your time at the event and give yourself space to recharge after.

Conferences can be challenging and rewarding. Planning ahead and defining a “successful conference” can help mitigate the anxiety and dread associated with large scale social events. Reach out to friends, take time for yourself, and recharge when necessary. Remember — this isn’t school! You have autonomy to attend what you want, on your schedule. Work to make the conference an enjoyable experience for you, rather than trying to fit into the conference mold. Conferences may be designed for extroverts, but with a little intentionality, can be equally as enjoyable for introverts.
Annual Scientific Meeting Features
Ample Networking Activities

New Member and First-Timer Orientation
Wednesday, November 13 • 5 to 6 p.m. • No fee but separate registration is required
New GSA members and first-time meeting attendees are invited to an informational session with GSA officers and staff. GSA leadership will be on hand to discuss how to navigate your first GSA meeting, find various networking opportunities, and become involved in the Society.

President’s Welcome Reception and Exhibit Hall Opening
Wednesday, November 13 • 6 to 8 p.m.
Meet your colleagues and help kick off the meeting with a stroll through GSA’s Exhibit Hall and a visit to the first poster session of the meeting. Posters will be on display from 6 to 8 p.m. and presenters will be at their boards from 6 to 7 p.m. Hors d’oeuvres and cash bars will be available. Supported by Johnson & Johnson Consumer Inc.

Educational Site Visit: Late-Life Creativity at the Blanton Museum of Art
Thursday, November 14 • Noon to 3 p.m. • Fee: $50 • Separate registration is required
An exploration of the possibilities of illuminating late-life creativity and the longevity dividend through an interactive tour and discussion of the Blanton Museum of Art with expert curators and art educators: a particular focus will be Ellsworth Kelly’s Austin, an installation conceived in his seventh decade but planned in his tenth decade. Fee includes entrance to the museum and transportation from the Convention Center.

Making Change: Building Leadership and Impact Through Effective Communications
Thursday, November 14 • 1:30 to 4:30 p.m. • Fee: $25 • Separate registration is required
Speakers: John Beilenson, SCP; Christine Gherst, SCP
This workshop will equip you with the communications skills you need to make a meaningful difference at your institution, in your community, and in the health and social services systems where you work. Become a high-impact academic leader — hear from experts as they share their pragmatic approach to for translating research into dynamic communications to effect practice and policy change.

GSA Fellows and International Reception
Thursday, November 14 • 6:30 to 8:30 p.m. • Invitation only
This reception is held annually to honor current and new GSA fellows, as well as international attendees of the Society. Fellows and international attendees only.

Living in Dog Years: The Science of How Dogs Age and the Implications for Human Aging
Thursday, November 14 • 7 to 9 p.m.
Speakers: Marie Bernard, Deputy Director, National Institute on Aging; Kate E. Creevy, Chief Veterinary Officer, Dog Aging Project, Texas A&M University; S. Michal Jazwinski, Tulane University and GSA President; Matt Kaeberlein, Dog Aging Project, University of Washington
Age is the greatest risk factor for many chronic conditions, such as obesity, arthritis, dementia, diabetes, and many cancers. This is true in people and also in our canine companions, who age about seven times more rapidly than humans. The goal of the citizen science program, The Dog Aging Project, is to understand how genes, lifestyle, and environment influence biological aging in companion dogs. The project is conducting the first large-scale longitudinal study of canine aging in more than 10,000 dogs along with double-blind, placebo-controlled clinical trials to evaluate the efficacy of rapamycin to slow aging in dogs. The results of this project will facilitate efforts to increase health span, the period of life spent free from disease, in companion animals and their people. At this session, attendees will learn about how the citizen science program was conceived and is being implemented, and how the results apply and may be translated to humans.

Academy for Gerontology in Higher Education Evening Event
Thursday, November 14 • 8 to 11 p.m. • Fee: $30 • Separate registration is required
Experience Austin, Texas, at Scholz Garden! All GSA attendees are invited to join the annual AGHE get-together. Expect BBQ sliders and snacks, a great selection of local brew and spirits, and Texas music at an old-school Austin institution. Elevate your GSA by getting yourself and friends on over to Scholz. A single Texas brew is included with each ticket purchase.

Academy for Gerontology in Higher Education Breakfast and Awards Presentation
Friday, November 15 • 7 to 8 a.m. • Fee: $25 • Separate registration is required for breakfast
Join your colleagues at the AGHE business meeting to celebrate award recipients and newest fellows. This event also offers a great opportunity to discover how to get involved in AGHE activities. The fee includes breakfast; however, limited general seating is available for those who want to listen and not purchase a meal.

Mentoring Consultancies for Emerging Scholars
Friday, November 15 • 8 to 9:30 a.m. • No fee but separate registration is required
The mentoring consultancies bring students and junior faculty members together with senior faculty, experienced researchers, and GSA leaders to focus on methodological challenges in publication
and research, share experiences, and develop problem-solving strategies that will enhance professional and career development. The consultancy is a highly structured process that provides each participant with an opportunity to both give and receive feedback on a particular issue related to publishing or research methodologies. Each person has a chance to speak and to listen; this unique and successful format reinforces the idea that when people face a challenge together, the answer is already in the room. Supported by The Mentoring Effect.

Gerontologists Giving Back Service Event With AGE of Central Texas
Friday, November 15 • 9 a.m. to Noon and 1 to 5 p.m. • No fee but separate registration is required
Be a part of the 2019 Gerontologists Giving Back Service Event, working with AGE of Central Texas’s Austin adult day center. AGE of Central Texas’s adult day health care centers are a unique resource in greater Austin. With more than 50 years of combined experience among the full-time nursing and professional staff, specializing in care of people with Alzheimer’s and memory loss, AGE provides respite to caregivers and socialization to older adults. AGE of Central Texas has invited us to its Austin adult day health center, where we’ll work alongside staff to engage members in cognitively and physically stimulating activities. GSA volunteers will have the option of a morning or an afternoon shift. Registration is limited to 20 volunteers, so sign up now!

Section Business Meetings and Award Presentations
Friday, November 15 • Noon to 1:30 p.m. • Fee: $25 • Separate registration is required for lunch
Join your colleagues at your section business meeting to celebrate award recipients and our newest fellows. This is also a great opportunity to discover how to get involved in your section’s activities. The fee includes lunch; however, limited general seating is available for those who want to listen and not purchase a meal.

Reframing Aging: America Needs an Aging Attitude Adjustment
Friday, November 15 • 2 to 4 p.m. • Fee: $25 • Separate registration is required
What is this Reframing Aging Initiative all about? In this workshop, you will learn why we propose to tackle ageism by reframing aging. Using tools and narratives that have been shown to move the needle on negative attitudes about aging, reframing aging is both a communications strategy and a new way of thinking about your own aging journey.

Humanities and Arts Interactive Session and Open Meeting
Friday, November 15 • 7 to 9 p.m. • Fee: $10 • Separate registration is required
Music performance and aging has a special resonance in Austin, a world-renowned center for music of all genres. In addition to the longevity of many performing lives and added value of experience and the longevity dividend, there is a long tradition of support for musicians with issues related to aging, such as the retirement homes founded by the composers Rossini and Verdi in Paris and Milan. In conjunction with HOME, Housing Opportunities for Musicians and Entertainers, a non-profit group made up of musicians and music business professionals dedicated to helping aging musicians in the Austin area pay their housing expenses, the Humanities and Arts Committee will present a platform discussion and performance with musicians and activists to explore the realities, challenges and dividends of aging and performance.

GSA Fun Walk and Run
Saturday, November 16 • 7 to 8 a.m. • Fee: $25 • Separate registration is required
Gather in the JW Marriott Hotel Lobby at 6:45 a.m. Runners, joggers, and walkers are invited to participate in a fun-filled morning experiencing the views of the Colorado River. Everyone is a winner in this race . . . and no timing will be done. Come out simply for the health benefit and for fun. All proceeds from this event will go to The Doris Schwartz Gerontological Nursing Research Award.

Minority Issues in Gerontology Committee Concept Coffee
Saturday, November 16 • 8 to 9:30 a.m.
Please join the Committee on Minority Issues in Gerontology for our annual concept coffee.

GSA Business Meeting and Installation of 2020 GSA President
Saturday, November 16 • 10 to 10:30 a.m.
Join your fellow GSA members for the annual business meeting of the Society. And congratulate S. Michal Jazwinski for his successful year as GSA president and welcome our new president, Kathy Hyer.

The Bo Diddley Evening Event — Great Blues by Great Older Performers
Saturday, November 16 • 8 p.m.
Details about this musical performance at a local club will be announced shortly. Group cabs and transportation from the hotel lobby will be arranged. Check posters in Austin and the GSA mobile app for additional information.

Visit www.geron.org/2019 for more information.
In the context of aging minority populations, Innovation in Aging recently devoted a special section to showcasing three studies of Latino aging selected from the 2018 International Conference on Aging in the Americas (ICAA).

For nearly two decades, the ICAA conference series, which is principally sponsored by the National Institute on Aging, has supported cutting-edge research on a wide range of issues related to Latino aging and health.

In the first study, Catherine García, MS, of the Leonard Davis School of Gerontology at the University of Southern California explored the biological risk profiles of older Latino subgroups.

In the second study, Elizabeth Vásquez, DrPH, of the Department of Epidemiology and Biostatistics at the State University of New York at Albany examined the association between adverse childhood events and multimorbidity in a racially and ethnically diverse sample of middle-aged and older adults.

In the final study, Sunshine Rote, PhD, of the Kent School of Social Work at the University of Louisville assessed caregiving across diverse populations.

Visit the journal website at academic.oup.com/innovateage to access the articles, which are published under the special section titled “Latino Aging and Health” in Volume 3, Issue 2.

Three Virtual Collections Appearing in Series B

In the September, October, and November issues, the Social Sciences section of The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences are featuring virtual collections on three important and timely topics: socioeconomic disparities in health and well-being (September), neighborhoods and living arrangements (October) and disability (November).

The September virtual collection features articles that delineate mechanisms accounting for socioeconomic disparities in cognitive functioning and physical health, and the impact of national income inequality on late-life health.

The October virtual collection features work on neighborhoods and living arrangements, with studies examining the impacts of neighborhoods on older adults’ risk of frailty, biological aging, and cognitive decline, as well as studies on residential relocation and life table analyses of living arrangements.

The November virtual collection focuses on disability and disablment, with articles exploring historical trends in disability and morbidity, individual-level fluctuations in short-term disability, psychosocial influences on disability including religion and social support, and methodological challenges, including the under-representation of highly disadvantaged persons in studies of disability.

These virtual collections can be accessed at academic.oup.com/psychosocgerontology/pages/virtual_collection.

Researchers Find Furry Friends Ease Depression, Loneliness After Spousal Loss

Florida State University (FSU) researchers have found the companionship of a pet after the loss of a spouse can help reduce feelings of depression and loneliness in older adults.

The study, funded by GSA and the WALTHAM Centre for Pet Nutrition and published in The Gerontologist, examined depressive symptoms and loneliness among people age 50 and older who experienced the loss of a spouse through death or divorce.

“Increasingly, there’s evidence that our social support networks are really beneficial for maintaining our mental health following stressful events, despite the devastation we experience in later life when we experience major social losses,” said Dawn Carr, PhD, FGSA, lead author and an FSU associate professor of sociology. “I was interested in understanding alternatives to human networks for buffering the psychological consequences of spousal loss.”

Carr and her team compared individuals who experienced the loss of a spouse to those who stayed continuously married. Then they explored whether the effects of spousal loss differed for those who had a pet at the time of the death or divorce.

They found all individuals who lost their spouse experienced higher levels of depression. However, people without a pet experienced more significant increases in depressive symptoms and higher loneliness than those who had pets. In fact, those who had a pet and experienced the death or divorce of their spouse were no lonelier than older adults who didn’t experience one of those events.
“That’s an important and impressive finding,” Carr said.

“Experiencing some depression after a loss is normal, but we usually are able to adjust over time to these losses. Persistent loneliness, on the other hand, is associated with greater incidents of mortality and faster onset of disability, which means it’s especially bad for your health. Our findings suggest that pets could help individuals avoid the negative consequences of loneliness after a loss.”

Carr’s team used data from a sample of older adults who participated in an experimental survey about human animal interaction as part of the University of Michigan’s Health and Retirement Study in 2012, and linked the data with additional data collected between 2008 and 2014. They identified pet owners as those participants who either had a cat or a dog.

“In everyday life, having a cat or dog may not make you healthier,” Carr said. “But when facing a stressful event, we might lean on a pet for support. You can talk to your dog. They’re not going to tell you you’re a bad person, they’re just going to love you. Or you can pet your cat, and it’s calming.”

The researchers noted that additional studies should be conducted to explain why having pets helps maintain mental health better. However, Carr suggested part of it may relate to whether you feel like you matter to someone.

“Oftentimes, the relationship we have with our spouse is our most intimate, where our sense of self is really embedded in that relationship,” Carr said. “So, losing that sense of purpose and meaning in our lives that comes from that relationship can be really devastating. A pet might help offset some of those feelings. It makes sense to think, ‘Well at least this pet still needs me. I can take care of it. I can love it and it appreciates me.’ That ability to give back and give love is really pretty powerful.”

The findings have potential consequences for social policies. For instance, it may be beneficial to include companion animals in the treatment of people residing in senior-living facilities, or reducing barriers to pet ownership in such settings.

The research was sponsored by a $50,000 grant from The Gerontological Society of America and the WALTHAM Centre for Pet Nutrition, the fundamental science center for Mars Petcare.

Researcher Natalie Sachs-Ericsson, PhD, of the FSU Department of Psychology partnered with Carr for the research project. Miles Taylor, PhD, FGSA, a professor of sociology at FSU, and Nancy Gee, PhD, of the Virginia Commonwealth University School of Medicine served as co-investigators.

Article Explores Whether Marriage Could Stave Off Dementia

Dementia and marital status could be linked, according to a new Michigan State University (MSU) study that found married people are less likely to experience dementia as they age.

On the other hand, divorcees are about twice as likely as married people to develop dementia, the study indicated, with divorced men showing a greater disadvantage than divorced women.

In one of the first studies of its kind, MSU professor of sociology Hui Liu, PhD, FGSA, and colleagues analyzed four groups of unmarried individuals: divorced or separated; widowed; never married; and cohabiters. Among them, the divorced had the highest risk of dementia.

The study, published in The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences, comes at a time when 5.8 million people in the U.S. are living with Alzheimer’s disease and related dementias, costing $290 billion, according to the Alzheimer’s Association. It’s a serious public health concern, Liu said.

“This research is important because the number of unmarried older adults in the United States continues to grow, as people live longer and their marital histories become more complex,” Liu said.

“Marital status is an important but overlooked social risk/protective factor for dementia.”

Liu and her fellow researchers analyzed nationally representative data from the Health and Retirement Study from 2000 to 2014. The sample included more than 15,000 respondents ages 52 and older in 2000, measuring their cognitive function every two years, in person or via telephone.

The researchers also found differing economic resources only partly account for higher dementia risk among divorced, widowed and never-married respondents, but couldn’t account for higher risk in cohabiters. In addition, health-related factors, such as behaviors and chronic conditions, slightly influenced risk among the divorced and married, but didn’t seem to affect other marital statuses.

“These findings will be helpful for health policy makers and practitioners who seek to better identify vulnerable populations and to design effective intervention strategies to reduce dementia risk,” Liu said.

The research was funded by multiple grants from the National Institute on Aging, including a new $1 million grant awarded to MSU to examine marriage links to dementia, with Liu as the principal investigator.

Co-researchers on the study include Zhenmei Zhang, PhD, FGSA, from MSU, Seung-won Choi from Texas Tech University and Kenneth Langa, MD, PhD, from the University of Michigan.
Loan Repayment Plan Expands to All NIH Agencies
As of September 1, National Institutes of Health (NIH) participation in the Extramural Loan Repayment Program for Health Disparities Research (LRP-HDR) has been expanded to include all NIH institutes and centers. (Previously, all LRP-HDR applications were assigned to and reviewed by the National Institute on Minority Health and Health Disparities.) This program is open to those who are working on health disparities research; an active NIH grant is not required. The repayment programs have some eligibility restrictions (such as U.S. citizens, nationals, or permanent residents only). However, unlike other NIH repayment programs, this one is not restricted to clinicians. The current application period is open until November 15. Visit www.lrp.nih.gov.

Federal Funds Slated for Prevention of Lower Urinary Tract Symptoms Research
A funding opportunity announcement issued by the National Institutes of Health with the National Institute of Diabetes and Digestive and Kidney Diseases and the National Institute on Aging invites applications for Clinical Research Centers to build on foundational work to establish a longitudinal cohort study with the intent of identifying plausible targets for future intervention studies on lower urinary tract symptoms. The Prevention of Lower Urinary Tract Symptoms Research Consortium will use qualitative and quantitative strategies to conduct collaborative, transdisciplinary studies to establish the scientific basis for future intervention studies to promote bladder health and prevent lower urinary tract symptoms and associated bladder conditions such as bladder infections, urinary incontinence, voiding dysfunction, overactive bladder, and interstitial cystitis/bladder pain syndrome in adolescent and adult women across the life course. The consortium will also conduct a range of additional studies to facilitate the success of future intervention and implementation studies. Applications are due November 7. Visit bit.ly/2l6qfta for more information.

Grants Will Support Studies on Peripheral Pathology in Lewy Body Dementias
A funding opportunity announcement issued by National Institutes of Health with National Institute of Neurological Disorders and Stroke and the National Institute on Aging will support research to identify potential diagnostic markers for the Lewy Body Dementias using non-blood or non-cerebrospinal fluid (CSF) peripheral specimens and tissues (e.g., skin, salivary gland, gastrointestinal tract, etc.). Blood and CSF have traditionally and extensively been examined for neurodegenerative disease biomarkers; however, research suggests that abnormal alpha-synuclein accumulation occurs in other peripheral tissues and specimens early in the disease course and may provide opportunities for early diagnosis and future treatment development. The due date for applications is December 3. Further information can be obtained at bit.ly/2mMqZ77.

Continued from page 1 – GSA Contributes to OAA Reauthorization Efforts
Over the past several months, three GSA representatives — Vice President for Professional Affairs Patricia D’Antonio, BSPharm, MS, MBA, BCGP; Greg O’Neill Student Policy Intern Haley Gallo, BS; and Policy Advisor Brian W. Lindberg, MMHS — provided language and guidance to the committee as it drafted the bill.

In addition to reauthorizing the OAA, H.R. 4334 introduces some enhancements. The GSA team specifically worked with the committee to include language in Section 207 of the bill that will revitalize the OAA’s research, evaluation, and demonstration activities. They also played an active role in advocacy activities with groups such as the Leadership Council of Aging Organizations and the Adult Vaccine Access Coalition.

GSA further collaborated with several partners — the National Council on Aging, National Association of Area Agencies on Aging, and ADvancing Age — to advocate for the inclusion of increased pilots and demonstration projects that could be developed into scalable, evidence-based programs. This input was based on a publication, “Strengthening the Effectiveness of Services for Older Americans Establishing Research, Demonstration and Evaluation Leadership and Standards for Aging Services under the Older Americans Act,” that GSA previously produced with the National Council on Aging.

As a result, H.R. 4334 directs the assistant secretary for aging to establish a National Research, Demonstration, and Evaluation Center for the aging services network, which would coordinate research, research dissemination, evaluation, demonstration projects, and related activities carried out under the OAA; to provide assessment of the programs authorized under the OAA; and to increase the repository of information on evidence-based programs and interventions available to the aging services network. The committee authorized appropriations of $20 million for each of the fiscal years 2020 through 2024.

“There are many other welcome provisions that GSA supported or helped to create in the new legislation,” Appleby said. “Among them, immunization status screening would now be recognized under the definition of disease prevention and health promotion. Family caregivers would be supported through an extension of the RAISE Family Caregiver Act authorization. And we would see steps taken to prevent and respond to social isolation and loneliness among older adults.”

The OAA currently serves more than 11 million older adults and their caregivers annually, with programs such as home-delivered and congregate nutrition services, in-home supportive services, transportation, caregiver support, disease prevention and health promotion, community service employment, the long-term care ombudsman program, services to prevent the abuse, neglect, and exploitation of older adults, and other supportive services.
New LTSS Compendiums Include LGBT Guidance

Resources for Integrated Care has released two new resource compendiums regarding long-term services and supports. “The Culturally Competent LTSS Resource Compendium” is intended for providers and health plans who are interested in enhancing their capacity to provide and coordinate culturally competent LTSS, and includes a number of resources for LTSS providers serving tribal populations. “The Culturally Competent LTSS for LGBT Individuals Resource Compendium” is intended for providers — including nursing facilities, assisted living facilities, adult day programs, home care services, and others — who are interested in enhancing their capacity to provide culturally competent long-term services and supports for LGBT individuals. To download “The Culturally Competent LTSS Resource Compendium,” visit bit.ly/2WZ7iW7. To download “The Culturally Competent LTSS for LGBT Individuals Resource Compendium,” visit bit.ly/2FHlAFp.

Initiative’s New Releases Showcase Support for Family Caregivers Across States

The Center for Health Care Strategies, Inc., has published a fact sheet and related infographic, “State Opportunities to Support Family Caregivers.” The fact sheet details tactics that states can use to support family caregivers and describes specific ways that states are finding to enhance family caregiver supports. These releases are part of Helping States Support Families Caring for an Aging America, a national initiative led by the Center for Health Care Strategies through support from The John A. Hartford Foundation, the Milbank Memorial Fund, the May & Stanley Smith Charitable Trust, and the Gordon and Betty Moore Foundation. To view the fact sheet and infographic, visit https://bit.ly/2ngtteu.

Brain Health Video Includes Dementia Overview

The Association of State and Territorial Health Officials (ASTHO) has released a new sketch video about brain health from a public health perspective with support from the U.S. Centers for Disease Control and Prevention (CDC) Alzheimer’s Disease and Healthy Aging Program. The video provides a quick overview of dementia in the U.S. as well as the CDC’s Healthy Brain Initiative for State and Local Public Health Road Map. It can be accessed atyoutu.be/8iQkBU8Sag and is also housed on the ASTHO webpage for healthy aging at www.astho.org/healthy-Aging. The latter site also includes a new brief titled, “Caregiving for people living with dementia and how health departments can make an impact.”
The University of Wisconsin–La Crosse (UWL) Therapeutic Recreation Program has earned Program of Merit for Health Professions designation from the Academy for Gerontology in Higher Education (AGHE), the first health professions program to receive this stamp of excellence.

The recent honor builds on a previous track record at UWL of work that responds to the interests, needs and opportunities for the growing, aging population. In 2018, UWL was the first university in Wisconsin to be designated as an Age-Friendly University, an international effort led by Dublin City University to highlight the role higher education can play in responding to the challenges and opportunities associated with an aging population.

UWL's program earned the Program of Merit designation by integrating gerontology and geriatrics competencies into its Therapeutic Recreation Program curriculum, based on standards and guidelines from AGHE (2015).

The designation came after a review and vote from the national Program of Merit for Health Professions Review Team.

Nancy Richeson, PhD, a UWL associate professor of recreation management and therapeutic recreation, was part of a national AGHE task force — which also included former AGHE President Marilyn Gugliucci, PhD, FGSA, FAGHE — that developed a set of standards and guidelines specifically for gerontology and geriatrics curriculum for health professions programs.

Richeson then worked with Gugliucci to apply to be one of the first university health professions programs nationwide to be reviewed based on those guidelines to become a Program of Merit. Additionally, the UWL program was awarded financial support through an AGHE grant from The Retirement Research Foundation to launch the AGHE Program of Merit for Health Professions.

Ten institutions that integrate geriatrics/gerontology competencies in one of their health professions program were eligible to apply for The Retirement Research Foundation funding through AGHE. UWL was the first to be awarded the funding and the first to successfully complete the Program of Merit review.

“UWL was well positioned to be considered for this important review. Dr. Richeson contributed greatly to building the AGHE standards and guidelines established for health professions programs,” said Gugliucci, who serves as chair of the AGHE Program of Merit for Health Professions. “She is clearly progressive in the field of aging and a leader in the field of therapeutic recreation.”

The work of integrating the competencies took time and effort, noted Richeson. Over several years, the UWL department reviewed the gerontology and geriatrics competencies and developed ways to integrate them into the program's existing coursework.

“Truly, this is a testament to the student-centered, action-oriented, and professionally committed folks who deliver an amazing therapeutic recreation program every day,” said Laurie Harmon, PhD, chair of UWL's Recreation Management & Therapeutic Recreation Department.

UWL's program will be recognized on the AGHE website and a certificate will be presented at the AGHE Annual Business Meeting in Austin, Texas, in November 2019.

UWL's new gerontology emphasis, open to all majors, is another way UWL is preparing future workers for an aging population. Student numbers in the program were reported as part of the review for the Program of Merit designation.

The Program of Merit is a voluntary program of evaluation for AGHE member and nonmember institutions that offer either gerontology programs (degree and non-degree granting) and/or health professions programs whose curricula integrates gerontology/geriatrics content. The Program of Merit designation gives gerontology and health professions programs an AGHE “stamp of excellence” that they can use to verify program quality, lobby within their institutions for additional resources to maintain program quality, market the program, and recruit prospective students.
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