GSA Cultivates Workforce Awareness During Pfizer Meeting

GSA leaders took the stage in late June at Pfizer, Inc.’s headquarters as invited guests during the pharmaceutical company’s new Medical Grand Rounds series. The event, titled “The Future of Geriatric Medicine and Gerontological Health Needs,” also welcomed representatives from the American Geriatrics Society (AGS) and included an interactive question-and-answer session with nearly 300 Pfizer employees tuning in worldwide.

The grand rounds are convened with leading experts in health care, science, and medicine to further the audience’s knowledge about current health trends. During the June session, the conversation focused on America’s preparedness to meet the challenges of providing appropriate health care to the aging population; the number of gerontologists, geriatric physicians, and other providers required to handle the needs of this demographic; and what steps must be taken to ensure support for critical aging research and an adequately trained workforce.

“Through our formal presentations and productive interactions, we were able to effectively communicate the value of GSA in representing the aging research enterprise and the opportunities presented to their company,” said GSA President Donald Ingram, PhD. “We are confident that a meaningful dialogue was established that will grow to benefit our mutual interests and objectives.”

Ingram delivered GSA’s main presentation; his counterpart was AGS President Barbara Resnick, PhD, RN, CRNP, FAAN, FAANP, a GSA fellow and former Health Sciences Section Chair. They were joined on the dais by GSA Executive Director James Appleby, RPh, MPH, and AGS Chief Executive Officer Jenny Chin.

Nutrition Spotlighted as OAA Reauthorization Talks Commence

As Congress debates the 2011 reauthorization of the Older Americans Act (OAA), one of the first hearings on the value of its specific programs addressed the topic of senior nutrition—in this case, the services provided by Title III of the act. GSA submitted an official statement for the record regarding the impact of nutrition on the health of seniors.

The June 22 hearing, titled “Senior Hunger and the Older Americans Act,” was convened by the U.S. Senate Committee on Health, Education, Labor, and Pensions Subcommittee on Primary Health and Aging. The presiding Senators were Chairman Bernie Sanders (I-VT) and Ranking Member Rand Paul (R-KY); Al Franken (D-MN) also attended.

“This issue is important not only from a moral perspective, but from a financial one as well,” Sanders said. “Persistent hunger and malnutrition leads to multiple chronic diseases, resulting in extended hospital stays and premature nursing home placements.”

Invited testimony was delivered by U.S. Assistant Secretary for Aging Kathy Greenlee, JD; Robert Blancato, MPA, executive director of the National Association of Nutrition and Aging Services Programs; Ken Gordon, executive director of the Area Agency on Aging for Northeastern

Continued on page 7
GSA Works with Others To Advance Aging Research

By James Appleby, RPh, MPH
jappleby@geron.org

GSA’s political neighbors in Washington, DC, may not be well-versed in the spirit of cooperation, but the Society itself has a lot to show for its recent focus on some valued alliances. Last month’s Gerontology News covered a webinar that resulted from GSA’s ongoing partnership with the National Institute on Aging (NIA). We welcomed Director Richard J. Hodes, MD, who responded to members’ questions on the funding payline for NIA research project grants. He reported that his team has been able to improve the institute’s payline, putting it on par with other agencies at the National Institutes of Health and giving special consideration to new investigators. I want to give special recognition to the dedicated staffers at the NIA for both their willingness to communicate with our members in the interactive webinar format, and for their ability to make significant improvements to the NIA payline levels in a very short period of time (under especially difficult economic circumstances).

As reported on the front page of this month’s newsletter, GSA had its own chance to be in the interactive spotlight during the recent Grand Rounds session organized by Pfizer, Inc. In this case, we joined forces with the leaders of the American Geriatrics Society to inform Pfizer representatives about the upcoming needs of America’s aging population. With GSA President Donald Ingram, PhD, representing our Society, the conversation largely focused on what we must do to ensure a robust health care provider workforce and support the research that specifically targets the senior population. It was a rewarding experience to showcase the value of GSA members’ work to such a large audience.

GSA also is continuing its collaboration with the American Aging Association (AGE) and the American Federation for Aging Research, which began last year when the three groups sponsored a symposium at the AGE annual meeting. The event proved so successful that we’re keeping the momentum going by holding a pre-conference workshop at GSA’s annual meeting in Boston this November. “The Biology of Aging: Interventions to Enhance Healthy Human Aging” will feature presentations from prominent leaders from all three organizations. Don Ingram again deserves credit for being the driving force behind this team-up. Additionally, in its continuing efforts to support the next generation of gerontologists, GSA recently sponsored the Student Data Blitz at the AGE meeting for the second consecutive year. This forum allows up-and-coming researchers to share their newest discoveries with each other.

The MetLife Foundation Journalists in Aging Fellows Program is another partnership that will bring value to attendees at GSA’s Annual Scientific Meeting. The MetLife Foundation has generously renewed its financial commitment to allow a second year of this successful program. The venture allows reporters to participate in our meeting, where they learn about new trends in the field, report on presentations, and network with GSA members to gather material for future stories.

GSA will also be joined at the Boston meeting by representatives of the National Council on Aging. With the help of GSA President-Elect Nancy Whitelaw, PhD, we will host an “NCOA Day” at the conference that will conclude with a session open to attendees from both organizations. We will continue to keep readers updated about GSA’s ongoing partnerships with stakeholder organizations and their positive impact on your membership experience. The GSA team is committed to working effectively with others and continues to pursue opportunities to advance the Society’s mission. I would also gladly welcome, at jappleby@geron.org, any suggestions for future collaborations.

Sincerely,

James

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In Memoriam

Malvin Schechter, MS, passed away at age 80 on May 3. He started his career as a journalist, working for wire services, editing a magazine on geriatrics and, with his wife, publishing newsletters on aging. According to The Washington Post, in the 1960s, Schechter exposed safety deficiencies in hospitals and nursing homes and later successfully sued the Department of Health, Education, and Welfare to obtain inspection records of nursing homes. He also reported on hospitals’ compliance with integration rules after the 1964 Civil Rights Act and on how blood banks often kept blood from black and white donors separate. In 1976, Schechter became a top deputy of the late Robert Butler, MD, a GSA fellow and the first director of the National Institute on Aging. Schechter later followed Butler to New York when the latter established a geriatrics department at the Mount Sinai School of Medicine. Schechter taught medical economics there for many years and also served as associate director of the International Longevity Center until his retirement in 1997. Schechter was the author or co-author of several books on issues related to aging, including 1993’s “Beyond Medicare: Achieving Long-Term Security.”

Members in the News

- A study on spousal caregiving presented by Angela Curl, PhD, at GSA’s 2010 Annual Scientific Meeting received coverage in numerous news outlets in late June. Curl’s research found that the longer men are retired, the worse they rate their health, but they report improved health when their wives retire.
- A LiveScience article on the MSNBC website quoted Denise Lewis, PhD, on the subject of older women’s portrayal in editorial and advertising images. Her research found that women over 40 are rarely portrayed, and in cases where they are, the photos are manipulated to reduce signs of age.

Member Spotlight

GSAs website features monthly Q&A sessions with distinguished members. The current spotlight shines on: [David Lindeman, PhD](#)
Visit [www.geron.org/Membership/member-spotlight](http://www.geron.org/Membership/member-spotlight) to ask questions and read previous interviews.

Colleague Connection

This month’s $25 amazon.com gift certificate winner: [Sheila L. Molony, PhD, RN, GNP-BC](#)
The recipient, who became eligible after referring new member [Elizabeth A. Stroshine, MBA, RN](#), was randomly selected using randomizer.org.
For more details on the Colleague Connection promotion, which includes a chance to win free lodging at the annual meeting, visit [www.geron.org/connection](http://www.geron.org/connection).

McFaddens Headline Alzheimer’s Conference

John McFadden, MDiv, and Susan McFadden, PhD, were the featured speakers during the recent annual Alzheimer’s Education Conference, “Dimensions of Dementia: Dementia, Friendship and Flourishing Communities: Where is the Hope?” During their presentation, they explored the psychological, social, and spiritual pain in persons living with dementia, as well as friendship and community in an aging society. Susan McFadden is a professor of psychology at the University of Wisconsin-Oshkosh, where she teaches adult development and aging, and the psychology of religion. John McFadden is an ordained minister of the United Church of Christ who has served in parish ministry for 34 years. He is currently workplace chaplain for Goodwill Industries of North Central Wisconsin. The couple has co-authored a book, “Aging Together: Dementia, Friendship, and Flourishing Communities.”

Shapiro Takes New Post at Cal State San Marcos

California State University San Marcos will welcome Adam Shapiro, PhD, as the new dean of its College of Humanities, Arts, Behavioral and Social Sciences. He will assume his new role mid-August, providing leadership for the newly created college that will include the current Departments of Anthropology, Communication, Economics, History, Liberal Studies, Literature and Writing Studies, Modern Language Studies, Philosophy, Political Science, Psychology, Sociology, Visual and Performing Arts, and Women’s Studies. He joins the school from his current post as a professor of sociology and chairman of the Department of Sociology and Anthropology at the University of North Florida. His research and teaching interests include families, psychosocial epidemiology, adult development and aging, and quantitative methods.

Haley Joins Solivita as Wellness Director

Solivita, an active adult and retirement community in Florida, has appointed Christy Haley, MS, as its full-time wellness director. Haley is a fitness and aging specialist with 18 years in the field and a current doctoral candidate in aging studies at the University of South Florida. She received a master’s degree in sport science and sport fitness management from the United States Sports Academy and a bachelor’s degree in human nutrition and foods from Virginia Tech. Haley also is a certified strength and conditioning specialist and older adult fitness certified by the American Institute of Fitness Educators. She has achieved additional certifications from the Arthritis Foundation.

Easom Takes Top Spot at Carter Institute

Leisa Easom, PhD, has been appointed executive director of Georgia Southwestern State University’s Rosalynn Carter Institute for Caregiving. Easom was appointed as the institute’s interim executive director in August 2010. Since that time, she has worked closely with agencies and representatives at the state and national level to increase awareness of the caregiver movement and advocate for family caregiving needs. Under her leadership, the institute has secured two grants from the U.S. Administration on Aging totaling $2.3 million and a $430,000 grant from Johnson & Johnson to finance and expand the institute’s National Quality Caregiving Network. Between 2009 and 2010, she helped secure more than $870,000 in grants to increase diversity in the healthcare profession through specific programs for financially needy students from disadvantaged backgrounds.
Sanders Shares Deep Concern for Seniors’ Needs

This month we feature a question-and-answer session with Senator Bernard “Bernie” Sanders (I-VT), the chairman of the Subcommittee on Primary Health and Aging of the Committee on Health, Education, Labor, and Pensions. This subcommittee is responsible for oversight of such items as the Older Americans Act (OAA), community health centers, home heating assistance, seniors programs, pensions, and dental care. Sanders was elected to the Senate in 2006 after serving 16 years in the House of Representatives. He is the longest serving independent member of Congress in American history.

**Brian W. Lindberg:** Senator Sanders, congratulations on your chairmanship of the Subcommittee on Primary Health and Aging, and on your first hearing regarding the reauthorization of the OAA and its nutrition programs. You seem to have a strong passion for the role that the OAA plays in ensuring that frail older adults receive the basic nourishment they need to stay healthy in their communities. From where does that passion come and do you see the OAA as part of what has been called the social safety net?

**Bernie Sanders:** Because I visit many senior centers in Vermont, and have for many years, I know first-hand how beneficial these meals programs are for seniors. Not only are the meals critical for the continuing health of many participants, but I’ve witnessed firsthand how important the social dimensions of these meals are. It’s important for older adults to remain active in their communities and in touch with others, and sharing a meal is the perfect opportunity. That’s part of the social safety net if ever there was one.

**BWL:** During the hearing, Senator Rand Paul questioned the validity of the argument that spending federal resources on OAA programs saves federal resources by keeping older adults out nursing homes and reducing unnecessary hospitalizations. Would you please comment on that and whether or not some of us as researchers need to do more to make the case for the value of the OAA?

**BS:** When you keep people well nourished, they are healthier and need less health care. That is not hard to understand. Malnourishment leads to multiple chronic illnesses, which result in unnecessary hospitalizations and nursing home placements; yet malnourishment can be easily prevented by offering seniors several nutritious meals a week. I think it would be extremely valuable for researchers to show, in dollars and cents, exactly how much our country could save in future health care costs by investing more in preventive measures through the Older Americans Act.

**BWL:** Last week you spoke for well over an hour on the floor of the Senate about the debt limit, deficits, and possible solutions. Would you mind sharing with our readers your thoughts on where older adults fit into the solutions and your ideas about fairness?

**BS:** Unless we reverse our current economic course, our children will have, for the first time in modern American history, a lower standard of living than their parents. I have spoken to everyday Americans who cannot find a decent paying job, and are struggling to feed their families, put a roof over their heads, or just stay afloat. The recession brought on by the greed and recklessness of Wall Street has depleted the life savings of older workers who now have to worry far, far more about what will happen to them when they retire. That addresses, I think, the difficult economic situation we face today. For older Americans, it is essential — essential — to recognize that Social Security has not contributed one nickel to the deficit. And yet Republicans want to put Social Security on the table in deficit reduction negotiations. Sadly, some Democrats, including the President, have also been willing to discuss Social Security in this context, despite that it has nothing to do with our national debt. Changing the way inflation is measured and raising the retirement age, as some members on both sides are proposing to do, will have dire consequences for our elderly population. Suffice it to say that I am doing everything I can to protect Social Security. It is, at present, a tough fight, but poll after poll indicates the American people are strongly behind supporting Social Security — the most successful social program in our nation’s history.

**BWL:** As you look at the difficult fiscal decisions that need to be made, how do you view the value of the work of the National Institutes of Health (NIH) and the National Institute on Aging (NIA)?

**BS:** As a strong and longstanding supporter of the NIH, I believe the NIH plays an important role in facilitating the scientific and medical research that leads to better treatments in the fight against cancer, Alzheimer’s, diabetes, arthritis, heart disease, AIDS, and other illnesses. In my opinion the research funded by NIH is one of the more productive uses for federal dollars, since it often results in advances in medical science. I do think, though, that when the federal government funds research that leads to new pharmaceuticals and new procedures, it has a responsibility to make sure that the government’s investment pays off in reasonable prices for those drugs and innovations, and not in high prices and huge pharmaceutical industry profits. The National Institute on Aging (NIA), as the primary federal agency for Alzheimer’s disease research, is working on the diagnosis, treatment, and care for people with Alzheimer’s disease and related dementias. I hope it will continue to make significant strides in our understanding of Alzheimer’s. Advances may get us to a point when doctors are able...
to diagnose Alzheimer’s earlier than ever before, and monitor an individual’s response to treatment in new and effective ways. I think we can be hopeful about the research at the NIA and all the other institutes of the NIH and I will continue to support their funding.

**BWL:** The political climate in Washington and the relationships between Democrats, Republicans, and Independents seem to be at an all-time low. Is this simply politics as usual or have we reached a point where the next election is truly interfering with doing the urgent work that the nation needs?

**BS:** This is an unusual time, when we are seeing — with a growing debt as the purported premise — a major assault on the middle class by large corporate interests and some of the very wealthiest people in this country. Tragically, we are seeing all the Republicans and a handful of Democrats doing their bidding. They have shown themselves willing to take the American economy hostage to their ideological demands for reducing the deficit on the backs of working families, the elderly, the sick, the children, and the poor, who have already sacrificed enough in terms of lost jobs, lost wages, lost homes, and lost pensions. I have been saying and the American people have been saying that millionaires and billionaires, who have had it so well in recent years, and the largest corporations in America must contribute to deficit reduction as a matter of shared sacrifice.

**BWL:** I’d like to cover a few more OAA reauthorization issues. Over the years, the Senior Community Service Employment Program (SCSEP) for low-income older adults has faced some opposition and I’d like to know what you think of its role of employing older persons and providing community social service agencies with assistance.

**BS:** I know the important role SCSEP plays in some people’s lives. Many low-income seniors need and want these jobs. I will look very closely at this program to strengthen it and make sure that participants are doing meaningful work. I know that the administration has suggested the program be moved from the Department of Labor to the Administration on Aging (AoA). This is something that, if it were to happen, would need to be accomplished in legislative language. I will be looking into whether moving the SCSEP program to AoA is the appropriate action as we approach reauthorization. I will also be looking into whether the SCSEP can better achieve a dual purpose of not only employing low-income seniors, but also providing a greater range of services to the elderly. I think we should explore whether SCSEP employment in services that aid the elderly should be a high priority.

**BWL:** GSA is very involved with a group called Age4Action, which focuses on expanding opportunities for those 50+ to work, serve, learn, and lead. The OAA is primarily known for all the services that it provides to older adults, but we think that showing how much older adults are giving back to society through service is very important to help reduce intergenerational tensions. Do you have thoughts on how we can address these tensions?

**BS:** I firmly believe that Older Americans Act programs allow people to remain healthy and in their homes for longer than they otherwise could. I recently talked with Assistant Secretary [for Aging] Greenlee and we agreed that many of the OAA programs need to focus more on seniors helping other seniors. I know that within the meal programs this is already the case where you see many seniors preparing and serving meals to other less functional seniors. It is my goal in this reauthorization to more fully incorporate the idea of seniors helping seniors throughout the Act.

**BWL:** I work closely with one of Vermont’s aging services programs, the State Long-Term Care Ombudsman Program, run by Jackie Majoros in Montpelier, who does her best to protect the rights of long-term care facility residents. Do you believe we have a quality long-term care system and what would you do to change it?

**BS:** I think we have a long way to go in order to have a comprehensive long-term care system in this country. Jackie Majoros, our State Ombudsman, works extremely hard to improve long-term care in Vermont. She is a strong advocate and ensures that the voices of long-term care residents are not ignored and that their rights aren’t trampled. I believe that health care is a human right, and that is why for 20 years in Congress I have consistently advocated for — and introduced legislation for — a single-payer health care system. About long term care, let me say specifically that one thing I am fighting against is a trendy idea here in Washington that we should turn Medicaid into a block grant program. I have grave concerns about what older adults and their families will face if Medicaid, which pays for a large chunk of long-term care, ceases to exist as we know it. Turning Medicaid into block grants would, I believe, be a huge step backward in the progress we’ve made over the decades in caring for older Americans.

**BWL:** Is there anything else you would like to say about your policy agenda for this Congress?

**BS:** I think we can agree that we must work together to reduce the deficit, but not at the expense of seniors — or working families, veterans, the poor, the disabled, or our children. For me, investing in Older Americans Act programs is not only the morally responsible thing to do, but it saves money over the long run because those programs keep our older citizens healthy and engaged with others and out of much more expensive hospitals and nursing homes. I look forward to working with each of you as we approach the reauthorization of the Older Americans Act.

**BWL:** Thank you very much for your time today and your commitment to programs serving older adults.

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Academic Conference Etiquette: To Do or Not To Do?

By guest author Chivon Mingo, PhD, ESPO Chair-Elect

Attire

Keep the phrase “dress for success” at the forefront of your mind as you prepare for every aspect of the meeting (e.g., presentations, social gatherings, interviews, exhibit hall viewing). Everything held during the conference is a potential networking event, and while some venues are indeed more casual than others, even your most casual outfit should be presentable in a professional atmosphere. Presenters and attendees should dress in business attire. Choose a pair of comfortable dress shoes because you will do a lot of walking and standing throughout the day. During the more casual events at the meeting, remain in conservative, appropriate attire. Bring a sweater or a jacket as many of the conference rooms may be cool. The goal is to be comfortable and not allow your attire to become a distraction during conversations, meetings, and presentations.

Presentations

Academic conferences provide a platform to disseminate your research findings and receive feedback from an audience with similar interests, which is often the highlight of the conference for emerging scholars. It is important to consider other factors that may impact the effectiveness of the presentation. Locate your room the night before your presentation to avoid being late on the day of your presentation. If vacant, take time to scope out the room’s set up. Verify that your presentation file is compatible with the audio-visual equipment. Keep a back-up copy of your presentation that can be accessed in the case of an emergency, and bring your own personal laptop because computers are not provided in session rooms.

Arrive early on the day of the presentation, and if you must bring your cell phone, please make sure that it is turned off or set to silent mode. Cell phone etiquette is important during other presentations as well. Be prepared to answer questions and respond to comments by remaining respectful and non-defensive. Audience comments and questions can be constructive and often mean that scholars are very interested in your work and find it promising.

Networking

As previously stated, the entire conference is an opportunity for networking, including causal gatherings or even an elevator ride. With this in mind, be prepared to network at all times; always carry business cards and copies of your C.V. because academic conferences provide opportunities to exchange contact information.

Be courteous to everyone. You may interact with an individual who will review your next article or become your next employer. Do not wait until you read someone’s name tag to be polite. Refrain from inappropriate behavior even in the most casual settings. A conference social event is not a night out with close friends, so remember to avoid behaviors such as becoming inebriated, engaging in excessive cursing and lewd behavior, and speaking negatively about other scholars.

Conference attendees at all levels are there for the same purpose of expanding their knowledge and network base; therefore do not be afraid to engage in conversations with people. If you see someone you want to talk to at a conference, walk up to him or her and introduce yourself. Approaching speakers at the end of a presentation is also acceptable. Additionally, it is not uncommon as an emerging scholar to seek a meeting with a person whose research interests you. In this case, contact the person in advance to schedule a meeting during the conference. Remember, schedules will fill up quickly, so making contact early is important.

The purpose of this article was to provide tips that could result in a positive conference experience. The impressions you make are likely to remain with you for years to come. Why not ensure that those impressions are positive impressions? Ultimately conferences are very beneficial and filled with invaluable opportunities for emerging scholars. While a conference is a professional environment, remember to have fun and enjoy all its aspects. We look forward to seeing you at the 2011 Annual Scientific Meeting!
Korean Centenarians Double
A recent article from the Anchorage Daily News stated that the number of South Koreans aged 100 or over has almost doubled since 2005, according to Statistics Korea. The country’s improved medical services were listed as a main cause. The number of centenarians numbered 1,836 in November 2010, indicating a 9.1 percent increase from 961 in 2005, the state agency indicated in its most recent census report. This figure includes 1,580 females and 256 males. The number of male centenarians, however, grew 146.2 percent over the past five years. The statistics report said more than seven out of 10 are suffering from an illness, with 33.9 percent of the group suffering from dementia. The healthiest of the group cited a well-regulated and a low-stress lifestyle as the main reason for their longevity.

Singapore Residents Concerned About Retirement Finances
Close to half of Singaporeans believe they lack sufficient financial resources for retirement, according to a recent survey by insurance company Aviva. This was reported in a recent article appearing in the Business section of channelnewsasia.com. The survey found, however, that an increasing number of Singaporeans intend to plan for their retirement to secure their long-term financial future. The survey of 1,000 people found that only 32 percent of respondents said they have sufficient savings and investments to tide over unforeseen circumstances.

New Pension Option Considers Muslims’ Needs
A news report from The Independent states that the first Sharia-compliant pension fund has been created in the U.K. The fund, which does not receive interest nor invest in companies that trade in guns, alcohol, gambling, tobacco or pornography, has been launched by Pointon York and the Islamic Bank of Britain (IBB). Investors will be able to save in a self-invest personal pension and choose from a range of Sharia-compliant assets. These could include cash, funds, or property. Savers will be able to enjoy tax relief on

European Elders Experience Widespread Abuse
A new report from the World Health Organization Regional Office for Europe (WHO/Europe) stated that an estimated 10,000 people age 60 and above are physically abused every day within this jurisdiction, totaling 4 million people every year. These individuals may experience being slapped, punched, kicked, burned, wounded with a knife, or locked in their rooms. The research also indicated that as many as 2,500 older people may die at the hands of family members. The report was released by WHO/Europe at the Third European Conference on Injury Prevention and Safety Promotion, in Budapest, Hungary. The report gave the first description of the size, causes and consequences of elder maltreatment, and provides an overview of good practice in prevention. This document, covering the 53 countries and 880 million people in the European region, looked at physical, sexual, mental, and financial abuse; along with neglect, such abuse comprises elder maltreatment in both private settings and residential and nursing homes. In addition to the estimated 4 million older people physically abused each year, 29 million are subjected to mental abuse (insults or threats); six million to financial abuse (stolen money or fraud); and one million to sexual abuse (sexual harassment, molestation, rape, or exposure to pornography). Older people who suffer from dementia and disability are more likely to be abused.

World Age Record Holder Dies
Brazilian Maria Gomes Valentim, who held the Guinness world record for being the world’s oldest living person, died at age 114 on June 22. She was born on July 9, 1896, in Carangola, Minas Gerais, Brazil, where lived until her death. She was married in 1913 and became a widow in 1946. She had one son, who had passed away, four grandchildren, seven great-grandchildren and five great-great-grandchildren.

Continued from page 1 - GSA Cultivates Workforce Awareness During Pfizer Meeting
Hansen, RN, MSN, FAAN. Jack Watters, MD, Pfizer’s vice president of external medical affairs, served as the facilitator.

“This is the type of collaboration that GSA will continue to actively pursue as we move forward,” said Appleby. “The Society is in the best position to bring private industry, academia, the government, and health care providers together to advance innovation in aging.”

Pfizer, the world’s largest research-based pharmaceutical company, is a member of GSA’s recently established Corporate Advisory Panel. The company’s participation led it to more actively address aging issues and thus resulted in GSA’s invitation to the grand rounds session.

In his talk, Ingram spoke about GSA’s interdisciplinary mission and the value of its annual meeting, its educational and policy branches, and its attempt to create unique collaborations across the public and private sectors worldwide. These partnerships, Ingram said, are crucial to what must be done to secure a trained workforce, promote science, and ensure funding for research specific to the aging population.

Representing AGS, Resnick discussed her organization’s own partnerships and advocacy efforts, and highlighted the need to bolster the ranks of America’s geriatricians.

Both the GSA and AGS presentations made reference to “Retooling for an Aging America,” the 2008 IOM report that detailed a strategy for developing a network of health professionals and frontline workers to avert a crisis in quality care for older persons. This landmark study was chaired by former GSA President John W. Rowe, MD. It called for initiatives to identify and disseminate new interdisciplinary models of care; increase recruitment and retention of health care workers; and increase support for research and demonstration programs that test alternative approaches such as direct-care workers, volunteers, and financial incentives for caregivers.
Continued from page 1 - Nutrition Spotlighted as OAA Reauthorization Talks Commence

Vermont; Mary Jane Koren, MD, MPH, vice president of the Picker/Commonwealth Fund Long-Term Quality Improvement Program; and Kay Brown, director of education, workforce, and income security at the U.S. Government Accountability Office.

“As each year the OAA nutrition services programs help more than two and a half million older adults — many of whom are functionally impaired and at risk of serious health consequences — receive the meals they need to stay healthy and decrease their risk of disability,” Greenlee said.

As currently authorized, the OAA includes support for congregate nutrition services, home-delivered nutrition services, and the Nutrition Services Incentive Program (which provides additional funding to states, territories, and tribal organizations to provide meals). Federal expenditures for these Title III components combined stood at $819.5 million in FY 2010.

Proper nutrition as a component of healthy aging has been recently in focus for GSA as the Society prepares for its 2011 Annual Scientific Meeting, the theme of which is “Lifestyle → Lifespan.”

U.S. Communities Struggle to Keep Up with Seniors’ Needs

Due to the financial consequences from the recent Recession, many U.S. communities have been unable to make significant progress in preparing to meet the needs of the country’s rapidly aging population. “The Maturing of America — Communities Moving Forward for an Aging Population,” a follow-up report to an extensive survey conducted in 2005, reveals that at best, communities have managed to maintain the status quo for the past six years due to the decline in the overall economy and local government budgets. This report also reveals that, despite the challenges, important advances have been made including increase in specialized training for emergency and public safety staff in dealing with older adults; growth of in-home supportive services; greater support for advanced education for the workforce; and expanded volunteer opportunities. The full report is available for download at www.n4a.org/files/MOA_FINAL_Rpt.pdf.

Parental Caregiving Results in Lost Income

Americans who provide care for their aging parents lose an estimated $3 trillion in wages, pensions, and Social Security benefits when they take time off to do so, according to “The MetLife Study of Caregiving Costs to Working Caregivers: Double Jeopardy for Baby Boomers Caring for Their Parents.” Produced by the MetLife Mature Market Institute in conjunction with the National Alliance for Caregiving and the Center for Long Term Care Research and Policy at New York Medical College, the study reports that individually, average losses equal $324,044 for women and $283,716 for men. The percentage of adults providing care to a parent has tripled since 1994. The authors analyzed data from the National Health and Retirement Study to determine the extent to which older adult children provide care to their parents. They also studied gender roles, the impact of caregiving on careers, and the potential cost to the caregiver in lost wages and future retirement income. The report points out that employers can provide retirement planning and stress management information and can assist employees with accommodations like flex-time and family leave. Individuals, it states, should consider their own health when caregiving and should prepare financially for their own retirement. Policymakers are made aware of the fact that more states are considering paid family leave, especially as it is accrued through workers’ compensation funds. On the federal level, a voluntary long-term care insurance program is part of the Patient Protection and Affordable Care Act and will likely increase public awareness of the issue. The report can be accessed at www.metlife.com/mni/index.html.

Hartford Publication Promotes Interdisciplinary Solutions for Geriatric Care

The John A. Hartford Foundation has issued a new report, “Developing Interdisciplinary Research Centers for Improving Geriatric Health Care,” which examines the challenges and rewards of interdisciplinary research, how it can improve geriatric care, and the lessons learned from their initiative. This document was authored by former GSA President Terrie Wetle, PhD, and GSA member Harold Pincus, MD. The report states that as the number of older adults living with chronic conditions soars, so does the need for team care that brings together doctors, nurses, social workers, and other practitioners. Interdisciplinary research and training have a crucial role to play in making that kind of quality geriatric care possible. The report can be accessed at bit.ly/jxV27L.

As part of the Leadership Council on Aging Organizations (LCAO), GSA supported the LCAO 2011 OAA Consensus Document, which gave a comprehensive series of recommendations for the reauthorization of the OAA. In its statement for the record given at the June hearing, GSA placed emphasis on two specific aspects of nutrition programs.

First, the Society echoed the LCAO’s call for further evidence based research — particularly in the area of determining unmet need, such as waiting lists. Secondly, GSA supported strengthening the volunteering component of Older Americans Act nutrition programs.

“Roles for volunteers of all ages can include delivering meals, providing nutrition counseling, and organizing education activities or congregate meals,” read GSA’s statement. “Benefits of engagement for older adults include higher ratings of self-reported quality of life, lower rates of dementia, reduced risk of depression, improved recovery from illness, and reduced mortality. Continuing to develop the connection between volunteering and older adult nutrition helps both groups, and reduced the cost burden on agencies.”
Institute Partnership Solicits HIV-Related Grant Applications
The National Institute of Mental Health, the National Institute on Aging, and the National Institute of Neurological Disorders and Stroke invite research grant applications focused on elucidating the mechanisms of HIV-associated neuropathogenesis in the context of aging, chronic infection with HIV, and long term exposure to highly active antiretroviral therapy (HAART). The neuropathogenic mechanisms of HIV-associated neurocognitive disorders (HAND) may be distinct in the aging HIV-infected populations given the potential interactions between aging associated events, HIV-associated neurodegenerative processes, and exposure to HAART. Understanding the pathogenesis of HAND in HIV-infected individuals over 50 years of age, in light of potential interactions with HAART, neurodegenerative diseases, and aging-related co-morbid conditions are the focus of this announcement. Applications ranging from basic research to clinical diagnosis and treatment in domestic and international settings are of interest. Multidisciplinary research teams and collaborative alliances are encouraged, but not required. Applications are due September 9. Visit grants.nih.gov/grants/guide/rfa-files/RFA-MH-12-070.html for further information.

RWJF Program Underscores Importance of Future Nursing Research
The Robert Wood Johnson Foundation (RWJF) is coordinating a unique, multi-funder initiative to identify, generate, synthesize, and disseminate evidence essential to informing efforts to implement the recommendations outlined in the Institute of Medicine (IOM) report, “The Future of Nursing: Leading Change, Advancing Health,” and to contribute to Campaign for Action’s goal of advancing comprehensive change in health care for patients and the country. The purpose of this activity is to increase and focus national attention on a common research agenda related to the IOM recommendations and to facilitate and coordinate funding activity across a range of funders of nursing research. Proposals will be accepted until January 3, 2012. Visit rwjf.org/applications/solicited/cfp.jsp?ID=21371 for further information.

OBSSR Encourages Methodology Use for Policy Resistant Problems
The Office of Behavioral and Social Sciences Research (OBSSR) within the National Institutes of Health is soliciting applications from organizations that propose to apply one or more specific system science methodologies to policy resistant public health problems. The outcome should enhance effective decision making regarding policies, interventions, and programs to improve population health in the U.S. and abroad, especially where resources are limited and only a limited number of programs/policies/interventions can be implemented. Applicants are encouraged to submit projects that tackle policy resistant health problems (i.e., ones in which the effects of planned interventions, programs or policies tend to be delayed, diluted, or defeated by responses of the system to the intervention itself) using a systems science methodology. This funding opportunity expires September 8. For more information, visit grants.nih.gov/grants/guide/pa-files/PAR-08-224.html.

NIA, AoA Team Up To Support Translational Community Research
The National Institute on Aging (NIA) and the U.S. Administration on Aging (AoA) invite applications using the R01 award mechanism for translational research that moves evidence-based research findings towards the development of new interventions, programs, policies, practices, and tools that can be used by community-based organizations to help older individuals remain healthy, independent, and living in their own homes and communities. The goal of this funding opportunity announcement is to support translational research involving collaborations between academic research centers and community-based organizations with expertise serving older individuals. This joint effort will enhance the understanding of practical tools, techniques, programs, and policies that communities across the nation can use to more effectively respond to needs of their aging populations. The announcement expires May 8, 2014. To find out more, visit grants.nih.gov/grants/guide/pa-files/PA-11-123.html.

SAVE THE DATE
September 26–30, 2011
GSA announces...
TAKE ACTION WEEK!
Worried about research funding and want to share the importance of what you do with national decision-makers?

ACT LOCALLY!
GSA invites its members to visit their local congressional offices. For more information, check out the advocacy toolkit on GSA’s website: www.geron.org/advocacy
New Nursing Building Planned for Texas School
The Paul and Jane Meyer Family Foundation has pledged $5 million for construction of a new nursing building on the campus of the University of Mary Hardin-Baylor in Belton, TX. The state of the art, $20-million, 70,000-square foot building will house classrooms, labs, offices, a learning resource center, and a lecture hall for the university’s Scott & White College of Nursing. In recognition of the Meyer family’s lead gift, the three-story building will be named the Isabelle Rutherford Meyer Nursing Education Center, in memory of Paul Meyer’s mother, who worked both as a nurse and as an educator.

Partnership Will Enhance Nurse Faculty Training
The American Association of Colleges of Nursing (AACN) has announced a new collaboration with the Jonas Center for Nursing Excellence to increase the number of faculty available to teach in nursing schools nationwide. This groundbreaking $2.5 million initiative will be managed by AACN as part of the Jonas Center’s larger effort to support 150 new doctoral students across all 50 states. Through the new partnership, the Jonas Center will provide selected students in research-focused or practice-focused doctoral programs with $10,000 in financial support, which will be matched by the institution in which the student is enrolled. In addition, schools will provide support for scholars to attend an AACN leadership development conference in Washington, DC, which will focus on career planning, faculty role development, research planning, and federal policy advocacy. At least one scholarship will be awarded for each state. Institutions in states without a doctoral program will be eligible to apply for support for individuals who will enroll in a program outside the state with the understanding that they will make a commitment to return to that state to engage in practice or scholarly leadership upon graduation.

Canadian College Plans New Health Facility
Sault College in Ontario, Canada, will receive $4 million from the province for a new state-of-the-art training institute for students studying in the health sciences field. The Health and Wellness Centre will feature modern labs and health facilities, and will be used to deliver specialized programs in areas such as human performance, chronic disease management, occupational therapy, physiotherapy, fitness and health promotion, and gerontology. The project is expected to create 70 jobs and is part of the province’s Putting Students First program to enhance post-secondary education in Ontario.

New Grants Total $2 Million for Palliative Care Research
The American Cancer Society and the National Palliative Care Research Center are awarding $2 million in research grants to researchers at 12 institutions for studies aimed at reducing the suffering of seriously ill patients and their family caregivers. The studies will be conducted over the next two years. Since 2007, a collaborative effort by the organizations has awarded 64 grants totaling almost $9 million. These grants, which are in addition to other grants in this area funded by the American Cancer Society, have brought much-needed research dollars to a field that has become an increasingly important part of patient care, but for which federal funding has been inadequate. This collaborative effort is designed to support clinician investigators conducting patient-oriented research in palliative care in hopes of bringing additional funding from federal agencies.

Drexel’s Nursing Doctorate Now Obtainable Online
Drexel University Online has added a doctor of nursing practice program to its offerings from Drexel’s College of Nursing and Health Professions. This program provides practitioners with advanced skills and knowledge through four designated tracks: practitioner, educator, clinical scientist, and clinical executive. It requires the completion of a pilot-sized, practice dissertation focusing on an area of nursing practice. Structured to be completed in one year, the dissertation helps to add practices utilized in the nursing field to the evidence base. Students will complete a study abroad program for two weeks in year two of the program.
The Geriatric Research, Education and Clinical Center at the Veterans Administration Puget Sound Health Care System (VAPSHCS), Seattle Division, and the Division of Gerontology and Geriatric Medicine, Department of Medicine at the University of Washington are jointly recruiting a full-time faculty member at the Research Assistant Professor Level, commensurate with qualifications. This is a non-tenured position. Candidates must hold the degree of Ph.D. and have experience and a strong interest in neurodegenerative diseases. The applicant should also have experience in research for understanding basic mechanisms of diseases related to aging. The successful candidate is expected to develop a strong independent neurosciences research program in cellular biology, and neurogeneticists including a strong core of individuals working on Alzheimer’s disease and other neurodegenerative disorders at both the VAPSHCS and the University of Washington. University of Washington faculty engage in teaching, research, and service.

The VAPSHCS and the University of Washington are Equal Opportunity, Affirmative Action Employers. The University is building a culturally diverse faculty and staff and strongly encourages applications from women, minorities, individuals with disabilities and protected veterans. The position will remain open until filled. Applicants should send curriculum vitae, 3 letters of recommendation and brief statements summarizing research accomplishments and future plans to:

Dr. Alvin M. Matsumoto, Professor, Associate Director, Clinical Affairs, GRECC (182b) Director, Clinical Research Unit Veterans Affairs Puget Sound health Care System 1660 South Columbian Way, Seattle, WA 98108

Contact Information: itamar@u.washington.edu and rfw3@u.washington.edu
Contact Phone: 206-744-9100

Thank you for your interest in this faculty position at the University of Washington.

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UNIVERSITY of MARYLAND SCHOOL OF MEDICINE Division of Gerontology, Department of Epidemiology & Public Health TWO NEW POSITIONS

1. DIVISION DIRECTOR (Associate or Full Professor) 03-307-117
The successful candidate for the division head position will be a national leader with commitment to conducting and fostering interdisciplinary research in the epidemiology of aging and gerontology and will have a record of extramural research funding and demonstrated leadership capabilities.

2. FACULTY POSITION (Associate or full professor) 03-307-118
The successful candidate will have expertise in one or more areas within the epidemiology of aging and/or gerontology, a record of extramural research funding, and interest in working with pre- and post-doctoral fellows and graduate students in epidemiology and gerontology. Successful candidates for both positions will be expected to develop and enhance collaborative research within the division, department and medical center, and participate in the department’s training programs for graduate students and post-doctoral fellows.

Qualifications (for both positions): A Ph.D. and/or M.D. with significant research training and experience, a history of independent funding, experience working in an interdisciplinary research setting, and training or experience in epidemiology and/or gerontology are required.

Applications of a cover letter, CV, and 3 references should be submitted to: wyu@epi.umaryland.edu
Confidential correspondence related to this position should be directed to Jack Guralnik, chair of the search committee at 410-706-2406 (jguralnik@epi.umaryland.edu) or Jay Magaziner, chair of Department of Epidemiology and Public Health at 410-706-3553 (jmagaziner@epi.umaryland.edu).

The University of Maryland, Baltimore is an Equal Opportunity, Affirmative Action Employer. Minorities, women, veterans and individuals with disabilities are encouraged to apply.

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