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‘Almost Home’
Documentary Rescheduled
The GSA-partnered PBS documentary “Almost Home,” originally slated to air at the end of January, has been rescheduled for February 21st due to a conflict with President Bush’s State of the Union address. Please visit www.almosthomedoc.org for the latest updates.

Initiative Seeks Older Nominees for Monumental Awards
Civic Ventures, a think tank based out of San Francisco, recently announced the launch of its Purpose Prize campaign – a program aimed at exceptional Americans over the age of 60. The organization plans to invest $100,000 in each of five individuals who defy expectations “by channeling his or her creativity and talent to address critical social problems at the local, regional, or national level.” Nominations and qualified applications are welcomed until February 28th, 2006. Visit www.leadwithexperience.org for further details.

Dallas Designated To Spur ‘The Gerontological Imagination’
Society Sets Sights on Texan Metropolis for 2006 Conference

For the second time in a few short months, GSA’s Meetings Department and Executive Committee have successfully negotiated an on-the-fly change in venue for the organization’s November convention. GSA’s 59th Annual Scientific Meeting will now be held in Dallas, TX from November 16 - 20th, 2006 (Thursday evening through Monday afternoon) at the Adam’s Mark Hotel. Plans for the event’s original Miami Beach, FL location had to be cancelled due to major renovations at the only suitable hotel there. Dallas hasn’t hosted the Society’s conference since 1978 — the very year the television show of the same name premiered.

GSA President Chuck Longino has appointed Margaret Higgins of The University of Texas Southwestern Medical Center as Local Arrangements Chair for the meeting. He urges potential presenters to keep the theme of the meeting, “Education and the Gerontological Imagination,” in mind when organizing their abstracts. The Call for Papers has been mailed and is also available online at www.agingconference.com. The final submission deadline is March 15th, 2006. Also due on the same date are any proposals for pre-conference workshops. For any information regarding these sessions, please contact meetings@geron.org.

The Adam’s Mark Dallas features 1,840 rooms with modern amenities including high-speed Internet access, as well as over 60 possible meeting spaces.

At the hotel’s downtown location, guests will find indoor and outdoor pools, several upscale restaurants, and direct access to the city’s light rail system.
Careers in Aging Week Gears Up for Fifth Time

The Gerontological Society of America (GSA) and the Association for Gerontology in Higher Education (AGHE) are proudly preparing for the fifth annual Careers in Aging Week, which will take place from April 17–21, 2006. Its purpose is to introduce a broad audience the wide-ranging career opportunities that exist in the field of aging and to promote GSA and AGHE as the premier organizations for supporting career development in the field of gerontology.

AGHE has created a website (www.careersinaging.com) that provides extensive information on the different career tracks and academic programs in gerontology. The site was designed to be a resource for people who are totally unfamiliar with the field of aging as well as for those who want to know more about aging-related careers.

The two organizations both extend invitations to their members, as well as to the members of the gerontological honor society Sigma Phi Omega, to participate. Individuals are asked to submit brief proposals to GSA of activities to take place on their campuses or in their organizations during the week. Examples of proposed activities include sponsoring forums with panels of professionals in the aging field, holding receptions with gerontology faculty and students, and offering open houses in university gerontology departments. Over 70 organizations participated in 2003, 90 in 2004, and over 100 in 2005.

In addition to the website, GSA and AGHE have created special printed material including careers in aging brochures and booklets, flyers, posters, pins, and notepads. To sign up for this year’s Careers in Aging Week, please contact Lindsay McCartney at lmccartney@geron.org.

NIH Budget Reduction Likely Impact Grants

For the first time since 1970, the National Institutes of Health (NIH) will see a cutback in its budget. The agency’s FY 2006 allotment has been reduced to $28.6 billion, a negative change of $35 million from the previous year. Although its level of financial support has been lowered, NIH continues to be the largest source of research funding for colleges and universities nationwide. According to Science magazine, NIH has in recent years funded more than 30% of grant proposals submitted; this year that figure will be less than 20%. The damage caused by the budget cut is exacerbated because NIH’s budget had increased by nearly one-third between 2001 and 2005. This now unpredictable growth rate can cause difficulty for researchers trying to consistently budget their resources.

Congressional Acts Slash AoA’s Appropriations Twice

The Administration on Aging (AoA), already suffering from a 1.2 percent budget decrease for FY 2006, was hit again when Congress passed a defense bill making a one percent across-the-board cut for federal agencies. This legislation was enacted to make room in a military spending bill for hurricane relief and pandemic flu preparedness.
The Gerontological Society of America’s Publications Committee is seeking nominations for the position of Editor-in-Chief of *The Gerontologist*, the Society’s multidisciplinary journal.

The position will become effective January 1, 2007. The Editor-in-Chief makes appointments to the journal’s editorial board and develops policies in accordance with the scope statement prepared by the Publications Committee and approved by Council (see the journal’s General Information and Instructions to Authors page). The Editor-in-Chief works with reviewers and has the final responsibility for the acceptance of articles for his or her journal. The editorship is a voluntary position. Candidates must be dedicated to developing a premier scientific journal.

Nominations and applications may be made by self or others, but must be accompanied by the candidate’s curriculum vitae and a statement of willingness to accept the position.

All nominations and applications must be received by March 31, 2006.

Nominations and applications should be sent to the Publications Committee:

Attn: Patricia Walker
The Gerontological Society of America
1030 15th Street, NW
Suite 250
Washington, DC 20005-1503

New Member Publications


Epidemiology of Aging: An Ecological Approach, by William Satariano. Published by Jones and Bartlett.


Radford’s Burggraf Receives Singular Nursing Distinction

Virginia Burggraf, Radford University’s Distinguished Chair in Gerontological Nursing, has been honored with a 2005 Award for Baccalaureate Education in Geriatric Nursing. This distinction was bestowed by The John A. Hartford Foundation Institute for Geriatric Nursing in collaboration with the American Association of Colleges of Nursing (AACN).

This national awards program was created to recognize model baccalaureate programs that exhibit exceptional, substantive and innovative baccalaureate curriculum in this subject area. Burggraf was the only faculty member in the nation to receive this year’s award. She was also a recent recipient of the National Gerontological Nursing Association’s (NGNA) 2005 Distinguished Service Award and was inducted into Seton Hall University’s College of Nursing Hall of Honor.

Colleague Connected!

This month’s $25 amazon.com gift certificate winner: Charlene Harrington
(She became eligible after referring new member Hyang Yuol Lee.)

For more details on the Colleague Connection promotion, which includes a chance to win free lodging at the annual meeting, visit http://www.geron.org/ColleagueConnection.htm.
November’s Gerontological Society of America meeting in Orlando, Florida gave Emerging Scholar and Professional Organization (ESPO) members an opportunity to be recognized for their hard work and achievements. Elected officers for the 2006 year were announced at our Saturday morning business meeting. Congratulations to the 2006 ESPO officers:

Lisa C. Barry, PhD, MPH - Chair
Kelly Niles Yokum, MPA - Chair-Elect
Michelle M. Washko, PhD, MS - Immediate Past Chair/Finance Committee
Heather L. Connors, MS - Secretary
Hsaio-yin (Emma) Chung, MA - Technology Chair/Task Force on Technology
Mindi Spencer - Humanities & Arts Committee
Shannon L. Bowles, MME, MT-BC - Humanities & Arts Committee
Nora E. Douglas, MA - Membership Committee
Brianne L. Winston - Membership Committee
Kelly Niles Yokum, MPA - Program Committee
Kelly G. Fitzgerald, MPA, MS - Public Policy Committee
Kathy Wilson, MBA - Public Policy Committee
Renee Beard, PhD - Publications Committee
Emily A. Greenfield, MS - Publications Committee
Lindsey A. Martin, MA - Research, Education and Practice Committee (GSA)
Heather L. Menne, MGS - Research, Education and Practice Committee (AGHE)
Heather L. Menne, MGS - Task Force on Interest Groups
Erica K. Husser, MA - Task Force on Interest Groups
Sarah A. Ruiz - Task Force on Minority Issues
Almas Dossa, PhD - Task Force on Minority Issues
Laurie A. MacDougall, MS - Task Force on Women
Leanne J. Clark, MGS - ESPO Representative (AGHE)
Shai Shubert, PhD - Biological Sciences Section
Casey Mayo, RN, MSN - Clinical Medicine Section
Natalie LeLand Wiatrowski - Clinical Medicine Section
Corinne R. Leach, MS - Behavioral and Social Sciences Section
Katherine S. Morris - Behavioral and Social Sciences Section
Gretchen E. Alkema, MSW - Social Research, Policy and Practice Section
Jerrilyn M. Quinlan - Social Research, Policy and Practice Section
Attila A. Priplata, PhD - Co-Chair, Student Paper Award
John Barnshaw, MA - Co-Chair, Student Paper Award

Congratulations are also in order for ESPO members who received paper and research awards at GSA’s annual meeting. The following members were honored:

BSS Student Research Award (Pre-Dissertation) - Saw-Myo Tun
BSS Student Research Award (Dissertation) - Heejeong Choi
SRPP Student Research Award (Undergrad/Master’s Level) - Michael Lepore
SRPP Student Research Award (Doctoral Level) - Kelly Fitzgerald
ESPO Interdisciplinary Paper Award - Emily Greenfield
Civic Engagement in an Older America Paper Awards - Iveris Martinez

It was exciting to see such involvement among new professionals at November’s Gerontological Society of America meeting. For those of you who haven’t heard, the 2006 Annual Meeting will be held from November 16-20, 2006 in Dallas, Texas.

Start planning now so that you may submit your abstract in time for the March deadline!
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The Gerontological Society of America is deeply indebted to the following agencies, corporations, foundations, and individuals for their contributions to the annual meeting and other educational programs of the Society during 2005.

Support for the 58th Annual Scientific Meeting
AARP Academic Affairs
The American Academy of Nursing’s John A. Hartford Foundation Building Academic Geriatric Nursing Capacity Coordinating Center
American Association of Colleges of Nursing
American Federation for Aging Research
The Atlantic Philanthropies
Association for Gerontology Education in Social Work
The Ellison Medical Foundation
Erickson School of Aging Studies, UMBC
The John A. Hartford Foundation Centers for Geriatric Nursing Excellence at:
Oregon Health & Science University School of Nursing
University of Arkansas for Medical Sciences College of Nursing
University of California San Francisco School of Nursing
University of Iowa College of Nursing
University of Pennsylvania School of Nursing
The John A. Hartford Foundation Institute for Geriatric Nursing, New York University College of Nursing
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National Association of Geriatric Education Centers (NAGEC)
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National Institute on Aging, NIH
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New York University College of Nursing
Office of Research Integrity through the American Association of Medical Colleges
PRAXEIS
Resource Centers for Minority Aging Research
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Springer Publishing Company

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Geron Corporation

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The Polisher Research Institute of the Madlyn and Leonard Abramson Center for Jewish Life

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Baywood Publishing Company

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Margret M. Baltes Foundation

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The New York Community Trust

Hartford Geriatric Social Work Faculty Scholars and Doctoral Fellows Programs
John A. Hartford Foundation

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The Hartford Institute for Geriatric Nursing/New York University

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The Atlantic Philanthropies

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The Atlantic Philanthropies

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Office for Research Integrity through the American Association of Medical Colleges
EISAI, Inc.

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Mount Mary College
Purdue University
Sigma Phi Omega
University of Indianapolis
University of Massachusetts Boston
University of Nevada, Reno
University of Oklahoma Health Sciences Center
University of Salamanca
Utica College

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Boon Nikom
Kiyoko K. Nitz
Lawrence Nitz
Michael R. Nolan
Diane L. Norcio
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The National Institutes of Health now has a $28 billion annual budget, with more than 80% going to support outside training and research, including grants to more than 3000 universities, medical schools, and other research institutions in the United States and abroad. These funds are allocated in a competitive process, using peer review by independent scientists to identify proposals with the most scientific merit for possible funding. It is a system revered by many, but it faces clear challenges.

Much has changed since the NIH grants program was established 60 years ago (1), when we received 800 grant applications. We now get ~80,000 applications a year. The NIH Center for Scientific Review (CSR) reviews and assigns priorities to two-thirds of these applications, recruiting each year more than 15,000 outside scientific experts in various specialized fields. Our regular reviewers volunteer 1 to 3 months a year to read and to assess applications. They then meet three times a year with other members of their review group to discuss and to score applications.

After an application has been assessed by the CSR-managed study section, CSR sends to the NIH institutes and centers a summary statement containing a score (and, in most cases, a percentile ranking), the peer reviewer’s comments, and a résumé of review discussions. In the second level of peer review, advisory councils make funding recommendations on the basis of these summaries, taking into consideration the institute or center’s scientific goals and public health needs.

Other nations provide direct funding to their research institutions for researcher salaries and facilities and have relatively smaller grant programs to provide additional funds. Although U.S. researchers are hired and formally paid by their academic institutions and medical schools, they depend on NIH and a few other competitive grants programs to support a large and growing fraction of their salaries and laboratory expenses. A scientist who fails to obtain a grant is now less likely to achieve tenure. A new investigator who does not attract grants will soon be forced to consider another career.

Getting a grant is more difficult now as NIH is no longer seeing rapid budget increases. The percentage of grant applications funded is shrinking, partly as a result of multiple applications from the same individuals and, to a lesser degree, as a result of an increase in the number of researchers submitting applications. What makes this situation particularly difficult is that the business plans of most universities and medical schools assume continued growth.

In addition to increased competition for NIH funds, the scope, pace, and complexity of biomedical research has increased dramatically in recent years, and the needs of the research community have changed significantly. An exciting and innovative idea can quickly become dated, and researchers now have less protected time to write applications, to mentor new investigators, or to serve on peer-review groups. All of these realities have put tremendous pressures on the NIH application review system. Our process must evolve to address these new realities.

Competitive pressures have pushed researchers to submit more conservative applications, and we must find ways to encourage greater risk-taking and innovation and to ensure that our study sections are more receptive to innovative
applications. We also must find ways to address the fact that clinical research applications may receive slightly less favorable scores than other applications (2).

NIH peer reviews are only as good as the reviewers we are able to recruit, and we must do more to enlist the best reviewers. Although face-to-face meetings of reviewers are the ideal and will continue, we are experimenting with new electronic technologies that permit reviewers to have discussions with greater convenience and to spend less of their precious time in traveling. For example, asynchronous Internet-assisted discussions—secure chat rooms—allow reviewers to “meet” and to comment independently of time as well as place.

The investigator-initiated (R01) grant application may be the world’s longest of its type—25 dense pages with unlimited appendices. Producing, reviewing, revising, and re-reviewing them takes an enormous amount of time for applicants and reviewers. We should look into whether these multipage applications and appendices are really useful, or if they are an unnecessary burden on reviewers. The seemingly endless appendices may never be read in full and some may never be read at all.

Finally, many have asked if the present two-tiered, 9-month review process should be shortened so that we can keep pace with the science and be more responsive to our applicants. Our system can be particularly frustrating for those who may need to make only minor revisions, because results from our reviews typically come too late for them to reapply for the next review round.

CSR has taken two steps to speed its review process. As of October 2005, we are posting summary statements of most reviews within 1 month after the study section meeting instead of 2 to 3 months after the meeting.

In February 2006, we will begin a pilot study to cut 1 1/2 months from our review process as recommended by a Trans-NIH Committee to Shorten the Review Cycle (3). Forty CSR study sections will participate in this pilot, which will speed the reviews of R01 applications submitted by new investigators. Resubmission deadlines will be extended to allow these new investigators to resubmit immediately if only minor revisions are necessary. Specifically, we will: (i) schedule study section meetings up to a month earlier; (ii) provide scientists their study section scores, critiques, and panel discussion summaries within a week after the section meeting; (iii) shave days from the internal steps involved in assigning proposals to study sections; and (iv) extend resubmission deadlines by 3 weeks.

If the pilot succeeds, we will seek to expand it. One major step needed before expansion should be completed by October 2006, when all R01 applications must be submitted electronically. CSR also plans to test knowledge-management software for speeding the referral of applications to the appropriate NIH institute or center and to study sections. We will also seek to use this software to speed assignment of applications to reviewers. In initial tests, this software appears quite promising.

Change can be difficult when so much is at stake, but it is urgently needed. For NIH to meet its mission and for science to advance, we must work together. I encourage anyone with a good idea or suggestion to contact me.

References and Notes


*The author is director, NIH’s Center for Scientific Review, Bethesda, MD 20814, USA; e-mail scarpat@csr.nih.gov
The only joint AGHE and GSA committee is the Research, Education, and Practice (REP) Committee, whose mission is to translate gerontological research into education and practice. One approach to achieving this mission involves organizing symposia to be presented at the annual AGHE and GSA conferences. The overall GSA theme for the 2005 conference was The Interdisciplinary Mandate, and REP Committee members – Marilyn Gugliucci, PhD, University of New England College of Osteopathic Medicine, and Judith L. Howe, PhD, Mount Sinai School of Medicine – designed and implemented a presentation that was featured as the GSA Presidential Symposium titled, Geriatric Interdisciplinary Teams: Assessing Educational and Clinical Impact. The symposium featured three speakers and a discussant who have extensive experience in interdisciplinary education, research, and practice. Phillip Clark, ScD, University of Rhode Island, addressed the question “What Would a Theory of Interdisciplinary Teamwork Look Like?” Dr. Clark outlined three foundation points for interdisciplinary educational theory (i.e., experiential learning, epistemology of inquiry, and educating the reflective practitioner). After presenting the details of these three points, he merged them together for a proposed model of interdisciplinary education. This proposed model links together learning levels (e.g., organizational, team, individual), learning domains (e.g., cognitive, normative), and learning processes (e.g., experiential, social).

Information was shared about the Team Skills Scale (TSS), which is used to assess the facilitation and member role/engagement skills of the team before and after team training. The audience learned that the GITT educational intervention is effective and provides a strong platform for training and measurement of team skills.

Gloria Heinemann, PhD, VA of Western New York Healthcare System and the University at Buffalo, presented on “Research On Team Effectiveness: Where Do We Go From Here?” Dr. Heinemann highlighted some of the challenges in doing research on team effectiveness (e.g., definition of and types of teams, appropriate outcomes for the research question). She closed by noting future research issues in this area, such as addressing the evolving teams (e.g., virtual teams), the impact of new technologies, and the role that organizations play in how teams operate.

Ruth Ann Tsukuda, PhD, Portland VA Medical Center, Oregon, served as discussant for the symposium. Dr. Tsukuda was one of the original Veterans Administration Interdisciplinary Team Program Directors at the Portland VA and is widely acknowledged as a pioneer on interdisciplinary teams. She crafted a response that highlighted the interconnectedness of the three presentations, yet pointed out the incongruence of interdisciplinary team education, research, and practice. The confluence of these three areas in interdisciplinary work requires further training and development.

The application of this symposium to the GSA Annual Meeting theme was evident. The speakers and discussant met the symposium’s goals, and the audience was presented with important theoretical, empirical, and practical information about geriatric interdisciplinary teams.
AGHE Staff Update
We would like to take this opportunity to announce the hiring of Brian Cowan as AGHE’s new program associate. Brian received his bachelor's degree from Elizabethtown College in Elizabethtown, Pennsylvania, and his Master’s in Ethics and Peace from American University. In addition to the day to day management of AGHE’s membership database system, much of Brian’s time with AGHE will be spent working on AGHE publication, resource, and development efforts.

AGHE Receives New Grant
AGHE has received funding from the Retirement Research Foundation to establish the first online clearinghouse for internships in aging. The project development will begin in January 2006. The goals of the program are:

- to provide easy, “one-stop shopping” for students and recent college graduates to locate, compare, and apply for aging-related internships;
- to provide aging-related agencies, companies, and organizations easy access to a single, national source of qualified interns;
- to assist academic institutions in placing students in aging-related internships;
- to help attract and retain qualified entry-level professionals to the field of aging by providing positive internship experiences in aging.

We will report further developments of the program in future issues of the AGHEXchange and on the AGHE website (www.aghe.org).

AGHE Distinguished Service Recognition
AGHE's Awards and Executive Committees have designated six persons to be recipients of the 2006 Mildred Seltzer Distinguished Service Recognition. These are individuals who have either already retired or who are approaching retirement and who have, through the years, provided significant service to this Association. The 2006 honorees are:

David L. Treybig
Derrel R. Watkins
Edward E. Morgan, Jr.
Robert N. Gandee
William Lane
Gloria Heinemann

Beth Israel Deaconess Medical Center and Harvard Medical School are seeking a Board Certified Geriatrician to serve as clinician and educator in the Gerontology Division. The successful candidate will be a recognized academic clinician, with achievements in the fields of geriatric care and teaching. The Beth Israel Deaconess Medical Center has growing ambulatory care and inpatient programs in Geriatrics and is the base of the Harvard Multicampus Geriatric Medicine Fellowship Program. Academic rank at Harvard Medical School will be based on qualifications. The Beth Israel Deaconess Medical Center is a 590-bed tertiary and quaternary care hospital.

Beth Israel Deaconess Medical Center and Harvard Medical School are Equal Opportunity Employers. Women and minorities are particularly encouraged to apply. Please send applications or nominations, together with a current curriculum vita, to:

Lewis A. Lipsitz, M.D.
Chief, Division of Gerontology
Beth Israel Deaconess Medical Center
110 Francis St., Suite 1A
Boston, Massachusetts 02215

For more information contact: lhartsou@bidmc.harvard.edu
Wake Forest University School of Medicine seeks applications for the position of Director of the Sticht Center on Aging and Rehabilitation which will include a faculty appointment in the Department of Internal Medicine. Candidates should have the MD or PhD degree, must have demonstrated excellence in research and possess exceptional leadership qualities. The successful candidate will be charged with building on a solid foundation of aging research that emphasizes excellence in research and teaching. For MD candidates, opportunities exist for leadership of the Section on Gerontology and Geriatric Medicine.

The Center currently consists of 5 physician and 5 non-physician faculty members with primary appointments in the Section of Gerontology and Geriatric Medicine; however, more than 60 faculty participate in the multidisciplinary research programs of the Center on Aging. The Center offers a large program for clinicians and scientists that provides training in gerontology and geriatrics for medical students, residents, and clinical and research fellows, as well as junior faculty members. The Sticht Center on Aging has gained national and international recognition for excellence through a high level of NIH funding including a Claude D. Pepper Older Americans Independence Center and by attracting scientists and trainees from the U.S. and throughout the world. The Director of the Sticht Center directly reports to Dr. William Applegate, Dean of the School of Medicine.

The Sticht Center on Aging is a leader in clinical care, providing innovative services to meet the special health care needs of older adults across a full range of geriatric practice settings (inpatient, outpatient, home and long-term care) as well as rehabilitation; and psychiatric care.

Wake Forest University is located in Winston-Salem, North Carolina and has an excellent quality of life, moderate four season climate, nearby mountains/ocean with affordable housing in a metropolitan area of approximately 1.3 million people. Wake Forest University School of Medicine is committed to equal opportunity, affirmative action and the diversity of its faculty and staff. Women and minorities are strongly encouraged to apply.

Applications including a current curriculum vitae or nominations should be sent by mail or e-mail to:

William Sonntag, Ph.D. • Chair, Search Committee for Director of the Sticht Center  
Attn: Adriene Cunningham, Dean’s Office  
Wake Forest University School of Medicine • Medical Center Boulevard • Winston-Salem, NC  27157  
e-mail: wsonntag@wfubmc.edu