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GSA to Co-Host Conference in China
GSA and Beijing Normal University are co-sponsoring an international conference, the Sino-U.S. Forum on Psychology of Aging, in Beijing, China, from April 20 to 21. The theme of this event is "Theory and Practice of Active Aging in Community." Researchers are invited to submit abstracts for poster presentations. The deadline is February 28. For further details, see www.geron.org/images/chineseforum2013CFA.pdf.

Social Gerontology Award Seeks Papers
In collaboration with American University, GSA offers the Theoretical Developments in Social Gerontology Symposium and Paper Award, which solicits papers or letters of intent by March 15. The strongest submissions will be invited to participate in a special symposium at GSA's Annual Scientific Meeting in New Orleans this November. These participants may be invited to submit a full paper for the award competition, which offers a $2,000 cash prize. For further details on this and other GSA awards, see page 6.

Conference Will Extend GSA’s Reach into Business Sector

This summer, GSA will cultivate new opportunities to serve the aging marketplace through Healthy Aging Means Business, a one-day consultative conference planned for July in Philadelphia.

This event — the first in a potential regional series — will be co-presented with NMI, an international strategic marketing consultancy specializing in health, wellness, sustainability, and healthy aging since 1990, with full-service consulting and market research services. NMI is headquartered in Pennsylvania with experience across multiple categories and market sectors.

The July conference will consist of a one-day comprehensive program offering an in-depth look at healthy aging market opportunities across healthy aging trends, health and longevity, and money and finances.

Attendees will be presented with evidence-based resources and examples to understand healthy aging trends, overcome challenges, and recognize opportunities in the aging marketplace. The agenda also will feature an interactive environment showcasing research, case studies and disruptive innovation techniques that can help make a business case for the healthy aging market.

"Healthy Aging Means Business will allow us to share the accumulated knowledge of our field with a largely untapped group of business leaders who need reliable, evidence-based information about the aging market," said GSA Executive Director and CEO James Appleby, RPh, MPH. "Although many of our participants will be individuals who never would have considered themselves interested in gerontology, we will demonstrate that they have a role to play in helping us advance innovation in aging."

Continued on page 5

Grant Strengthens Outlook for Social Work Practice

Thanks to $1.35 million in recently awarded funding from The John A. Hartford Foundation, GSA is reaffirming its commitment to meeting the health care needs of older adults through adequate social work support.

This three-year grant will build upon the successes of the Hartford Geriatric Social Work Initiative (HGSWI), which has been coordinated by GSA since 2000 and has supported over 200 doctoral fellows and faculty scholars who are helping to build a workforce of social workers trained and educated in geriatrics.

The new money will be used to establish a Hartford/GSA National Center on Gerontological Social Work Excellence, which will focus on three major objectives: a collaboration with the U.S. Veterans Administration (VA) to develop social work research leaders to help advance evidence-based knowledge related to VA practice in aging; the mobilization of the current HGSWI Alumni Network using their expertise to impact practice and policy; and the creation of five Hartford Academic Centers of Excellence in Geriatric Social Work at institutions of higher education.

"The grant builds on our many successes over the last 13 years and gives us an opportunity to shift our attention to better infusing social work health care practice with evidence-based knowledge," said GSA Deputy Executive Director Linda Harootyan, MSW, who will serve as program director of the National Center. "Interdisciplinary collaboration and partnership, a core of GSA's mission, will be a cornerstone of this effort."

The National Center also will seek funding from a variety of sources to support and expand its objectives and functions, as well as ensure its sustainability.

The grant is designed to maintain the momentum of progress made by the HGSWI and to have a greater impact on practice. An estimated 220,000 licensed social workers provide services to older adults and their families in the U.S., but only five percent have...
From the Executive Director

New Challenges Lurk Where Aging Meets Disability

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

Gerontology is the chosen profession of nearly all of this newsletter’s readers, but have you ever considered how your aging expertise has made an impact on the older adults in your personal life?

Many of us act as formal or informal caregivers for aging loved ones, and when it comes to helping them adopt a new technology designed to improve his or her quality of life, for example, it’s likely we’re the first people called upon to help with the transition.

When the Institute of Medicine (IOM) and the National Research Council of the National Academies established its Forum on Aging, Disability, and Independence, GSA got in on the ground floor as a founding member. These forums, which have been formed around numerous subject areas, create a communal environment that fosters dialog across sectors and institutions.

GSA member Judith Kasper, PhD, serves as our official representative to the forum (which is co-chaired by former GSA President John W. Rowe, MD, and GSA Fellow Alan Jette, PhD, PT), and she and I have participated in its several meetings over the past year. The most recent was in December, which featured an all-day workshop on “Fostering Independence, Participation, and Healthy Aging Through Technology.” It featured presentations from leaders across the spectrum of technologies involved with aging and disability issues.

Among the many other GSA members who were in attendance was Katie Maslow, MSW, who’s currently serving as a scholar-in-residence at the IOM. She’s working on a 22-month study on family caregiving that will analyze publically funded programs, and private sector organizations.

As the workshop unfolded, it was made clear that while there are many promising technologies in the market now and many more on the way to assist seniors, there was acknowledgement that just as many technologies have failed at the intersection with the intended audience. That is, when individuals or their caregivers have tried to use these new technologies to solve real life issues, the intervention hasn’t worked — for a variety of reasons, some of which may include cost, stigma, fear, rejection of the technology, etc.

While understanding the dynamic of this interface between individuals who are aging and/or have a disability will require further scientific research, it is also valuable to have a more general narrative that describes the situation.

As such, Maslow and I agreed that it would be beneficial to have the perspective of professional gerontologists who have themselves encountered this caregiving/technology application issue when providing care for their own loved ones. Therefore we invite readers of Gerontology News to share with us stories about your technological successes or failures as it relates to supporting your family members or friends who are aging with, or into, a disability.

Please be assured these responses will be kept in confidence and will not become part of the IOM study. We are simply looking to better inform this work by getting first-hand accounts from individuals familiar with work in the field of aging. As always, I can be reached via e-mail at jappleby@geron.org. These recollections will certainly prove valuable as this important research on the subject is undertaken.

James

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New Publications by Members


Members in the News

• GSA Fellow Mark Brennan-Ing, PhD, was quoted in an article that appeared in the Johannesburg Guardian, UK Guardian, and Mail and Guardian in August 2012. This article focused on caregiving and older adults with HIV. It was based on Brennan-Ing’s presentation at a satellite session on HIV and Aging at the International AIDS Conference in Washington, DC, in July 2012.
• The Los Angeles Wave published an article in May 2012 that mentioned UCLA professor of social work and GSA Fellow Valentine M. Villa, PhD, regarding his work on the first comprehensive analysis of the health of the Latino baby boom population.
• GSA Fellow Nicholas Castle, PhD, was cited in a The New York Times article in August 2012 that focused on nursing home citations and deficiencies in hand hygiene.
• The Wall Street Journal ran an article in September 2012 that mentioned the work of Brian K. Kennedy, PhD, at The Buck Institute for Research on Aging. Kennedy and his team found a form of rapamycin that was effective in increasing the life spans and improving symptoms in mice with two different diseases caused by other mutations in the progeria-connected Lamin A gene. Rapamycin also is being studied for its impact on the normal aging process.
• GSA Fellow Jay Olshansky, PhD, appeared in the Herald Tribune in September 2012 regarding a study, financed by the MacArthur Foundation Research Network on an Aging Society, that examined life expectancy and education levels. Others mentioned throughout the article include John Haaga, PhD, and GSA Fellow James Jackson, PhD.

Member Spotlight

GSA’s website features monthly Q&A sessions with distinguished members. The current spotlight shines on:

Xiao Xu, PhD

Visit www.geron.org/Membership/member-spotlight to ask questions and read previous interviews.

Colleague Connection

This month’s $25 amazon.com gift certificate winner:

Patrick C. Cullinane, MS

The recipient, who became eligible after referring new member Sandra N. von Doetinchem de Rande, MS, 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.

GSA Members Rank Among New Policy Fellows

Six GSA members have been selected for the second cohort of the Health and Aging Policy Fellows Program. Christine E. Bishop, PhD, Brook Hollister, PhD, Kenneth Brummel-Smith, MD, Joan K. Davitt, PhD, MSS, MLSP, Rajean P. Moone, PhD, Emily J. Nicklett, PhD, MSW, will spend the next twelve months working to shape a healthy and productive future for older Americans. Bishop, of Brandeis University, and Hollister, of the University of California, San Francisco, will spend their time in Washington, DC, while Brummel-Smith, Davitt, Moone, and Nicklett, will remain at their home institutions (Florida State University, University of Maryland, Greater Twin Cities United Way, and University of Michigan, respectively) to focus on health policy projects. The program is open to physicians, nurses, and social workers at all career stages with a demonstrated commitment to health and aging issues. The fellows are chosen by a selection committee of the program’s National Advisory Board. Visit www.healthandagingpolicy.org for more information.

Concordia Appoints Kohnke to Director’s Position

Concordia University, Nebraska has named Kevin Kohnke, DrPH, as the director of its human services, gerontology, and family life programs. Before joining the Concordia faculty in 2007, Kohnke served as a parish pastor and in deaf ministry. He holds a master of divinity as well as a master’s in human development and family studies from the University of Missouri, a doctorate of ministry from Denver Seminary in marriage and family counseling and a doctorate of philosophy in human sciences with a specialization in gerontology from the University of Nebraska. In addition to his new role, Kohnke volunteers weekly as an area nursing home counselor, leads three GriefShare groups and is in the process of obtaining his mental health counselor license with a specialization in geriatric care.

Firman Named to The NonProfit Times’ Top 50 List

James Firman, EdD, MBA, president and CEO of the National Council on Aging (NCOA), has been named one of The NonProfit Times’ Top 50 leaders in its Power & Influence list for 2012, which contains the nonprofit sector’s top executives and strategists. Firman is cited as “transforming NCOA from a membership organization to a true council of entities that share a common vision for older adults” and describes NCOA as “part think tank, part advocacy force, part incubator of innovation.” He has led NCOA since 1995. Firman has served in several national leadership roles, including chair of the Leadership Council of Aging Organizations, board chair of the National Human Services Assembly, and chair of the Independent Sector’s National Advisory Committee on Charting Social Impact.

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Narrowly averting the precipitous tumble down the fiscal cliff, the Senate passed a compromise bill, the American Taxpayer Relief Act of 2012, at about 2 a.m. on January 1, by a vote of 89-8. The deal was brokered by Vice President Joseph Biden and Minority Leader Mitch McConnell (R-KY). Speculation throughout New Year’s Day kept late-night partiers from sleeping in because of uncertainty about the actions of Speaker John Boehner (R-OH) in the House of Representatives. Would he bring the Senate bill to a vote or would House Republicans pass the bill with amendments that would likely be unpalatable to the Senate? The House eventually supported the bill with a 257-167 vote at 10:45 p.m. President Obama signed the bill on January 2.

Key Features of the American Taxpayer Relief Act

The final bill addresses many of the outstanding fiscal cliff concerns, including the Bush-era tax rates, estate and gift tax rates, and Medicare physician reimbursement. However, the fiscal cliff deal failed to provide a permanent solution to many of the financial problems facing the country. It failed to provide a permanent solution to the sequester, only delaying the automatic spending cuts until March 1. It did not lay the groundwork for a federal budget, did not resolve the debt limit debate, and did not complete the work of providing appropriations beyond March 27, when the current continuing resolution expires.

Tax rate changes: The bill will permanently extend current tax rates for individuals earning less than $400,000 and couples earning less than $450,000. Tax rates will revert to the Clinton-era levels of 39.6 percent (up from 35 percent) for those making more than $400,000. The higher rate will only be applied on the income above $400,000 for individuals and $450,000 for families. Wealthy taxpayers will experience an increase in the tax rate from 15 to 20 percent on capital gains and dividends. Married couples earning more than $300,000 and individuals earning at least $250,000 will face a phase-out of the personal exemption.

Payroll tax: The payroll tax holiday will not be extended for another year. Since 2011, the payroll tax rate, which funds Social Security, was 4.2 percent. The payroll tax rate will now revert to the pre-2011 level of 6.2 percent.

Estate tax: The estate tax exemption will remain the same as in 2012 but will be adjusted for inflation. The estate tax exemption for 2013 will be $5.25 million per person. Effective January 1, the top estate tax rate increased from 35 percent to 40 percent. These rates and exemption levels are permanently extended. Portability is also extended and the gift tax exemption was adjusted for inflation and will be $5.25 million.

Older Americans Act funding: The fiscal cliff deal also provided older Americans added security by increasing funding for important Older Americans Act and other aging programs. For FY 2013:
- $7.5 million for Area Agencies on Aging
- $7.5 million for Medicare State Health Insurance Programs
- $5 million for Aging and Disability Resource Centers
- $5 million to the National Center for Benefits and Outreach Enrollment

“Doc fix”: There is a one-year “doc fix” included in the bill. This prevents the scheduled 27 percent reimbursement cuts to Medicare physicians.

Sequestration: The bill addressed sequestration and delayed the automatic spending cuts by two months until March 1. The cost of continuing current spending levels will be paid equally through tax revenue increases and later spending cuts. The bill reduces the total amount of the sequester by $24 billion from $1.2 trillion to $1.176 trillion. If the sequester takes effect in FY 2013, total cuts will equal $85.33 billion instead of $109 billion due to the $24 billion reduction. Half of the $85.33 billion in cuts would come from defense spending and the other half would come from non-defense spending.

CLASS Act repeal: Also included in the bill are the repeal of the CLASS Act and the establishment of a Commission on Long-Term Care. It is reported that President Barack Obama agreed to repeal the CLASS program in exchange for Republicans agreeing to raise the tax rates on the wealthiest Americans. Many believe that CLASS would not have been implemented until a large Democratic majority in both chambers of the Congress could modify its structure and funding formula.

Commission on Long-Term Care: The Commission on Long-Term Care will “develop a plan for the establishment, implementation, and financing of a comprehensive, coordinated, and high-quality system that ensures the availability of long-term services and supports.” The commission will investigate the interaction between Medicare, Medicaid, and private long-term care insurance, and should account for demographic changes and trends in order to improve the delivery system for long-term services and supports. It will consist of 15 members with the president, Senate majority leader, Senate minority leader, speaker of the House, and House minority leader each appointing 3 members. Members will represent the interests of consumers, older adults, family caregivers, health care workers, private long-term care insurers, state insurance departments, and state Medicaid agencies. Members must be selected within one month of the enactment of the fiscal cliff deal and within six months of appointing the members, the Commission must vote on a long-term care proposal.

Additional items: The bill also extends Medicare programs of importance to older Americans, including the payment for outpatient therapy services and specialized Medicare Advantage plans for special needs individuals. The bill also extends the Qualifying
Individual Program, which pays the Medicare Part B premiums of low-income Medicare beneficiaries with incomes between 120 and 135 percent of the federal poverty level. Also included in the bill are various tax extensions, including the deduction of state and local general sales taxes, the above-the-line deduction for qualified tuition, the research credit, and the credit for energy-efficient appliances. The federal unemployment benefits were extended for a year without a budget offset elsewhere. The extended benefit provisions and the funding for reemployment services and reemployment and eligibility assessment activities are extended as well.

Beyond the Fiscal Cliff: the Debt Ceiling

The country reached its debt ceiling, or the legal borrowing limit, on December 31, 2012, and the debt issuance suspension period lasts through February 28. On January 23, the House of Representatives passed legislation, 285-144, allowing the federal government to keep borrowing money until May 18. Among Republicans, 33 voted against the measure while 86 Democrats voted for it.

As of this writing, all signs point to the bill’s passage, with Senate Majority Leader Harry Reid (D-NV) stating that the Senate will pass the House bill without changes and the White House agreeing not to block the legislation from becoming law.

Republicans hope that by pushing the debt limit off the table until May, attention can be focused on the sequester that is scheduled to take effect in March and the continuing resolution (funding federal agencies), which also expires in March. They would like to try to force the Democrats’ hands on the issues of defense spending and entitlement reform. In addition, the debt ceiling legislation may also pressure the Senate to pass a budget — something it hasn’t done in several years. In the legislation is a provision that would delay the salaries of representatives and senators if either chamber fails to adopt a budget resolution by April 15, hence the catchy name of the bill: the “No Budget, No Pay Act.”

Representative Pete King (R-NY) was one of 33 Republicans to vote “no,” and told The Hill publication that he had a problem with the bill’s provision that would withhold lawmakers’ pay if either the House or Senate did not pass a budget by April 15. “To me, it was well-intentioned, but any time you equate pay with a vote, it’s basically using federal money to influence a vote,” he said. “For me, either it violates the letter or the spirit of the Constitution.”

While 86 Democrats supported the bill as a viable way to address the debt ceiling problem, the Democratic leadership opposed the bill and said the attempt to block member pay is a “gimmick.”

House Budget Committee Ranking Member Chris Van Hollen (D-MD) said the bill takes the wrong approach of setting up yet another short-term deadline by which a huge fiscal agreement must be reached, which he said would only roil the markets further. “By setting up what amounts to another ‘fiscal cliff,’ all our Republican colleagues are doing is prolonging economic uncertainty,” he told The Hill.

And Deficit Reduction

Deficit reduction will remain a constant issue well into the 113th Congress, which will likely engage in tax system reform conversations, including non-retirement accounts, exemptions, tax code “loopholes,” and charitable tax deductions. Entitlement reform will also be a major challenge for the 113th Congress with the Medicaid and Medicare programs facing increased scrutiny due to the mounting pressure to decrease the federal deficit and curb spending. Many of the same proposals that were a part of the National Commission on Fiscal Responsibility and Reform (aka Simpson/Bowles), the budget proposal from Representative Paul Ryan (R-WI), and other deficit-reduction proposals will be a part of the discussion again this year. For example, Senate Democrats, led by newly installed Budget Committee Chair Patty Murray (D-WA), have indicated that they will present a federal budget but that the proposal will include revenues, something anathema to most Republicans. Ryan, Murray’s House counterpart, is said to be working on a budget that would balance the nation’s books in just a decade. This budget will surely involve drastic spending cuts to entitlement programs. The Obama Administration has already announced that it will miss the legal deadline of February 4 to provide Congress with the president’s budget.

Does anyone feel like “it’s déjà vu all over again, again?”

Continued from page 1 - Conference Will Extend GSA’s Reach into Business Sector

GSA currently is recruiting conference presenters, who will consist of leading subject matter experts from academia and business.

The expected audience will represent multiple business industries and many job functions, including executives responsible for strategic planning, brand management, product development and innovation, as well as professionals working in market research, client services, and application research. GSA members are certainly invited to attend as well. This new event has its origins in the successful Aging Means Business forums that were developed by the GSA’s National Academy on an Aging Society and held at the Annual Scientific Meeting from 2009 to 2011.

“The concept of ‘healthy aging’ — once exclusive to the over-65 population — is now embraced across the entire demographic spectrum,” said GSA Director of Alliance Development Annette Schmidt. “As our GSA members know, aging demographics are creating large global opportunities in areas such as finance, technology, nutrition, healthcare, architecture, travel, and leisure. It seems that agelessness has become a cultural preoccupation, from 25 to 105.”

She added that many health issues that were once the domain of older people, such as obesity and diabetes, have reached epidemic proportions across the aging spectrum.

“This suggests that while agelessness may be the cultural ideal, the reality is that healthy aging is the true goal,” Schmidt said.

More information about Health Aging Means Business will be posted to geron.org in the coming weeks, including faculty presenters, the agenda, and online registration details.
The Gerontological Society of America recognizes outstanding individuals through a host of awards. For a full description of nomination requirements and the list of past awardees, visit www.geron.org/Membership/Awards or e-mail GSA’s awards coordinator at awards@geron.org.

**CAREER AWARDS**

Nominations for these awards must be submitted by the first Monday in May (with the exception of the Social Gerontology Award). Self-nominations are not accepted.

**Society-Wide**

Donald P. Kent Award: This award is given annually to a GSA member who best exemplifies the highest standards for professional leadership in gerontology through teaching, service, and interpretation of gerontology to the larger society.

Robert W. Kleemeier Award: This award is given annually to a GSA member in recognition for outstanding research in the field of gerontology.

M. Powell Lawton Award: This $2,500 award honors contributions from applied gerontological research that have benefited older people and their care.

Maxwell A. Pollack Award for Productive Aging: This $8,000 award recognizes instances of practice informed by research and analysis, research that directly improved policy or practice, and distinction in bridging the worlds of research and practice.

Margaret M. and Paul B. Baltes Foundation Award: This $1,000 award acknowledges outstanding early career contributions in behavioral and social gerontology.

Doris Schwartz Gerontological Nursing Research Award: This $300 award is presented to a GSA member who has a record of outstanding and sustained contribution to geriatric nursing research.

Task Force on Minority Issues in Gerontology Outstanding Mentorship Award: This award recognizes outstanding commitment and dedication to mentoring minority researchers in the field of aging.

Gene Cohen Creativity and Aging Research Award: This award, given in association with the National Center on Creative Aging, recognizes a professional whose research clearly shows that creative activities, particularly arts programs, can maintain and even improve the physical, emotional, and cognitive well being of older adults.

Theoretical Developments in Social Gerontology Symposium and Paper Award: To be considered for this $2,000 award, original concept papers or letters of intent on social gerontology theory are due to the awards coordinator on March 15. The best concept papers/letters of intent will be invited to participate in a symposium at the Annual Scientific Meeting, and some may be invited to submit a full paper for award consideration.

**Biological Sciences (BS) Section**

Nathan Shock New Investigator Award: This $1,500 award recognizes innovative and influential publications. It acknowledges outstanding contributions to new knowledge about aging through basic biological research.

**Behavioral and Social Sciences (BSS) Section**

Distinguished Career Contribution to Gerontology Award: This award recognizes career contributions that have articulated a novel theoretical or methodological perspective or synthesis that addresses a significant problem in the literature.

Distinguished Mentorship in Gerontology Award: This award is given to an individual who has fostered excellence in, and had a major impact on, the field by virtue of their mentoring, and whose inspiration is sought by students and colleagues.

Richard Kalish Innovative Publication Award: This award recognizes insightful and innovative publications on aging and life course development in the behavioral and social sciences in two categories: (1) The Book Category, which provides a $250 award; and (2) The Article Category, which provides a $250 award.

**Health Sciences (HS) Section**

Joseph T. Freeman Award: This $250 award is given for lectureship in geriatrics to a prominent physician in the field of aging, both in research and practice.

Excellence in Rehabilitation of Aging Persons Award: This $250 award is designed to acknowledge outstanding contributions in the field of rehabilitation of aging persons.

**PAPER AND POSTER AWARDS**

Applicants for these awards also must submit an abstract for GSA’s Annual Scientific Meeting. The deadline is March 15; visit www.geron.org/abstracts for details.

**Society-Wide**

Senior Service America Awards for Research Related to Disadvantaged Older Adults: These awards, sponsored by Senior Service America, Inc., acknowledge outstanding applied research that advances understanding of disadvantaged older adults. There are two levels: (1) The Senior Scholar Level, which provides a $1,000 award given to a GSA member at least with five years after receiving a terminal graduate degree; and (2) The Junior Scholar Level, which provides a $500 award given to a GSA member within five years of receiving a terminal graduate degree.

**Biological Sciences (BS) Section**

George Sacher Student Award: This $500 award is given to the best student presentation by a GSA member from the BS Section at the Annual Scientific Meeting.

**Behavioral and Social Sciences (BSS) Section**

Student Research Awards: These awards are given for completed empirical studies dealing with a topic of relevance to GSA’s BSS Section. There are two levels: (1) The Dissertation Level, which provides a $1,000 award for an exemplary paper by a student member who received a doctorate no more than 18 months before the submission deadline; and (2) The Pre-Dissertation Level, which provides a $500 award for an exemplary paper by a student member who has yet to attain a doctoral degree.

**Health Sciences (HS) Section**

Research Award: This $1,000 award is given to a new investigator in the HS Section. It is designed to encourage postdoctoral research and encourage participation in the Annual Scientific Meeting.

Person-in-Training Award: This $500 award is given for an exemplary paper written by a student member of the HS Section.

The Austin Bloch Post-Doctoral Fellow Award: This $400 award is designed to encourage research and to foster interest among students in the HS Section to play an active role in the Annual Scientific Meeting.

**Social Research, Policy, and Practice (SRPP) Section**

Student Research Awards: These manuscripts must address a significant research, policy, or practice topic; be research-based, conceptual, or analytical; and contribute to the body of knowledge. There are two levels: (1) The Carroll Estes Senior Scholar, which provides $500 award for an exemplary paper by a student member who received a doctorate no more than 18 months before the submission deadline; and (2) The Elaine Brody Junior Scholar, which provides a $300 award for an exemplary paper by a student member who has yet to attain their doctoral degree.

**Outstanding Student Poster Award:** This $300 award is given for an exemplary poster by a student member (graduate or undergraduate) for excellence in research as reflected in an outstanding poster presentation.

**Emerging Scholar and Professional Organization (ESPO)**

Interdisciplinary Paper Award: This $250 award is given for the best inter-disciplinary empirical or theoretical research paper on an aging-related topic.

Poster Award: ESPO offers five awards for exemplary posters.

Douglas Holmes Award for Quality of Life/Quality of Care: This $500 award solicits original papers that exhibit outstanding research in improving social services for the elderly in long-term care.

**Task Force on Minority Issues in Gerontology Student Poster Award:** The Task Force for Minority Issues in Gerontology offers a Poster Award to recognize student members of GSA for innovative and demonstrated research focusing on issues surrounding diverse racial and ethnic population groups (Blacks, Hispanic/Latinos, Asian/Pacific Islander, Native Americans).
The following awards were announced during GSA’s 65th Annual Scientific Meeting in San Diego. The Society salutes the outstanding researchers below for their contributions to gerontology and thanks the selection committees for their time and efforts in choosing the winners. For information on how to apply for GSA’s awards, visit www.geron.org/Membership/Awards.

**Society-Wide**

**Theoretical Developments in Social Gerontology Award**
Judith K. Treas, PhD, University of California, Irvine
“Incorporating Immigrants: Integrating Theoretical Frameworks of Adaptation”

**Senior Service America, Inc., Junior Scholar Award for Research Related to Disadvantaged Older Adults**
Jennifer Karas Montez, PhD, Harvard University
“Widening Education Gap in Mortality among White Women”

**Behavioral and Social Sciences Section**

**Austin Bloch Award**
Tyesha N. Burks, PhD, Johns Hopkins University School of Medicine
“Age-Dependent Effects of Angiotensin II Type I Receptor Blockade on Disuse Atrophy”

**Emerging Scholar and Professional Organization Interdisciplinary Paper Award**
Shannon Hendrix-Buxton, MA, University of South Florida
“The Effects of Apolipoprotein E on Lifestyle Activities and Cognitive Performance: Evidence from the Victoria Longitudinal Study”

**Health Sciences Section**

**Research Award**
Anda Botoseneanu, MD, PhD, Yale University
“Long-Term Trajectories of Lower Extremity Function in Older Adults: Estimating Gender Differences While Accounting For Potential Mortality Bias”

**Person-In-Training Award**
Joshua J. Armstrong, MSc, University of Waterloo, Canada
“Patterns of Multimorbidity in the Ontario Home Care System”

**Social Research, Policy, and Practice Section**

**Carroll L. Estes Award – Senior Scholar**
Andrea Wysocki, PhD, MPP, Brown University
“Potentially Preventable Hospitalizations among Elderly Medicaid Home and Community-Based Service Users Compared to Nursing Home Residents”

**2012 awardees**

**Elaine M. Brody Award – Junior Scholar**
Jeff Laguna, University of Southern California
“Racial/Ethnic Variation in Pain Following Inpatient Palliative Care Consults”

**Outstanding Student Poster Award**
Sarah Dury, Vrije Universiteit Brussel
“Neighborhood Influences on the Decision to Volunteer”

**Poster Award**
Jiyoung Lyu, MS, University of Massachusetts Boston
“Childhood Socioeconomic Status (SES) and Cognitive Functioning: Gender and Race/Ethnicity Differences”

**Poster Award**
Tianyuan Li, PhD, The Hong Kong Institute of Education, China
“Age Differences in Trust: Universal or Country-Specific?”

**Poster Award**
Wai Chan, MS, Purdue University
“Being Moderate is Good (Enough)? Physical Activity Partially Mediates the Relationship Between Conscientiousness and Quality of Life of Retirees”

**Poster Award**
Sarah Dury, Vrije Universiteit Brussel
“Neighborhood Influences on the Decision to Volunteer”

**Poster Award**
Elizabeth A. DiNapoli, MA, The University of Alabama
“Staff Knowledge and Perceptions of Sexuality and Dementia of Older Adults in Long-Term Care”

**Task Force on Minority Issues in Gerontology Student Poster Award**
Maichou Lor, MS, RN, University of Wisconsin-Madison
“Evaluating the Feasibility of Visual Aids in a Hmong Health Education Program for Breast and Cervical Cancer Screening”

**Douglas Holmes Award for Quality of Life/Quality of Care**
Andrea Wysocki, PhD, MPP, Brown University
“Potentially Preventable Hospitalizations among Elderly Medicaid Home and Community-Based Service Users Compared to Nursing Home Residents”

For information on how to apply for GSA’s awards, visit www.geron.org/Membership/Awards.
acknowledgment of support

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38th Annual Meeting and Educational Leadership Conference of the Association for Gerontology in Higher Education
AARP Office of Academic Affairs
American University, Office of the Provost
George Mason University, College of Health and Human Services
George Mason University, Partners for Education in Geriatrics Program
Lincoln Memorial University, College of Nursing
Scripps Gerontology Center, University of Kentucky
College of Public Health
USC Davis School of Gerontology

65th Annual Scientific Meeting
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American Federation for Aging Research
CVS
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Glenn Foundation for Medical Research
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### MetLife Foundation Journalists in Aging Fellows Program
The MetLife Foundation

### 2012 Careers in Aging Week
The John A. Hartford Foundation

### Maxwell A. Pollack Award for Productive Aging
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### M. Powell Lawton Award
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### Task Force on Minority Issues in Gerontology
Senior Service America, Inc.

### Theoretical Developments in Social Gerontology Award
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### Gene Cohen Creativity and Aging Research Award
The National Center for Creative Aging

### Senior Service America Awards for Research Related to Disadvantaged Older Adults
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### Douglas Holmes Award for Quality of Life/Quality of Care
The RESQCare Interest Group

### Excellence in Rehabilitation of Aging Persons Award
Timothy L. Kauffman, PhD, PT

### Doris Schwartz Gerontological Nursing Award Endowment Fund (including contributions made through the Fun Walk/Run at the Annual Scientific Meeting)
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[Learn how your contributions can help GSA advance research, education, and practice in the field of aging at www.geron.org/donate.]
AARP Updates Long-Term Services and Supports Report
AARP’s “Across the States 2012: Profiles of Long-Term Services and Supports” is the ninth edition of the AARP Public Policy Institute’s state long-term services and supports report. It has been published for the past 18 years and was developed to help inform policy discussions among both public and private sectors in long-term services. The 2012 report presents comparable state-level and national data for more than 140 indicators, drawn together from a wide variety of sources into a single reference. There are two volumes of this report: a full report with an overview of key findings and trends, maps and graphs, and individual profiles for each state, the District of Columbia, and the nation as a whole; and an executive summary with an overview of key findings and trends, and ranking tables for each indicator. To access the reports, visit www.aarp.org/home-garden/livable-communities/info-09-2012/across-the-states-2012-profiles-of-long-term-services-supports-AARP-ppi-ltc.html.

Census Bureau Issues ACS Data
The U.S. Census Bureau has released estimates from the American Community Survey (ACS) for the combined years from 2007 to 2011, providing statistics down to the neighborhood level on school enrollment, jobs, housing, and many other measures. Along with the estimates, the Census Bureau is rolling out a series of new tools to make it easier to search, embed on other websites, download and share the survey estimates. The bureau updated its popular QuickFacts site with the new ACS statistics, and has also launched “Easy Stats,” a tool that allows users to build their own tables by selecting a desired topic and geography. Early this year, the bureau will release “Dwellit,” a mobile app designed to put Census Bureau statistics directly in the hands of new users in an engaging way. The ACS release consists of about 11 billion individual estimates. These five-year estimates are based on completed interviews with almost 2 million housing units each year from 2007 through 2011. Groupings of five-year estimates are released annually and are available for all states, counties, places, congressional districts, census tracts and block groups. The new release marks the first time since the 2000 Census that statistics for ZIP Code tabulation areas have been released on such a wide range of topics. In addition to detailing housing and commuting, the 2007 to 2011 estimates permit communities to observe the composition of their population, from preschool to the oldest ages and milestones in between, including college, work and marriage. Additional details may be found at factfinder2.census.gov/faces/nav/jsf/pages/wc_acs.xhtml.

CMS’ Statistical Supplement Issues Latest Report
The U.S. Centers for Medicare and Medicaid Services (CMS) Office of Information Products and Data Analysis produces an annual “Medicare and Medicaid Statistical Supplement” report that provides detailed statistical information on Medicare, Medicaid, and other CMS programs. The supplement includes 115 tables and 67 charts describing health expenditures for the entire U.S. population, characteristics of the Medicare and Medicaid covered populations, use of services, and expenditures under these programs. This CMS report is published in electronic form and is available for each year from 2001 through present. The 2012 supplement edition is organized into 14 chapters and can each be downloaded and viewed separately at www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MedicareMedicaidStatSupp/2012.html.

Parkinson’s Foundation Releases Preliminary Study Figures
The National Parkinson Foundation (NPF) has released early findings from the largest clinical study of Parkinson’s disease ever conducted, showing that depression is the most important factor influencing the quality of life and health of Parkinson’s patients. The study, known as the Quality Improvement Initiative (QII), is collecting data from more than 5,000 people with Parkinson’s in four countries. QII is one part of the NPF’s broader Parkinson’s Outcomes Project to determine what works best in treatment and care with an aim toward slowing the impact of the disease. The report can be found at www.parkinson.org/NationalParkinsonFoundation/files/3f/3fca24f4-9081-4f82-b96c-7a996d2133a3.pdf.

Continued from page 1 - Grant Strengthens Outlook for Social Work Practice
specialized in gerontology. The John A. Hartford Foundation has already invested over $62 million in addressing this recognized shortage in trained geriatric social workers. “The John A. Hartford Foundation is pleased that GSA will be leading these renewed efforts and that we will be continuing the important public-private partnership with the Veterans Administration,” said Nora O’Brien-Suric, PhD, the foundation’s senior program officer for this grant. “The work of the Hartford/VA research scholars supported under this program will have direct impact on social work interventions in the provision of VA services to older veterans.”

The entire project will be steered by a National Advisory Board chaired by GSA Fellow Barbara Berkman, DSW, PhD, who also serves as the national program director for the HGSWI’s Scholars Program.

“I am so excited to be working with such an esteemed group of individuals who represent many disciplines and who will support the National Center by providing guidance and oversight to the program,” said Berkman, the Helen Rehr/Ruth Fizdale Professor at the Columbia University School of Social Work. “These board members will play an important role as we envision the future of the HGSWI.”

She will be joined on the board by former GSA President Lisa Gwyther, MSW, LCSW, of the Duke University School of Medicine; GSA Fellow J. Taylor Harden, PhD, RN, FAAN, the program director of GSAs National Hartford Centers of Gerontological Nursing Excellence; GSA Treasurer Nancy Kroopf, PhD, MSW, of the Georgia State University School of Social Work; GSA member Ken Schmader, MD, of the Duke University School of Medicine; and GSA Fellow Nancy L. Wilson, MA, MSW, of the Baylor College of Medicine.
This column discusses the criteria, the logistics, and GSA leadership advice on the abstract submission process for the 2013 GSA Annual Scientific Meeting. This year the conference will be held in New Orleans from November 20 to 24. The theme of the meeting is “Optimal Aging Through Research” and should be factored in to your abstract preparation. This theme captures the interdisciplinary focus of GSA and its efforts to “optimize” life throughout the aging process.

Deciding on a topic for your abstract should be done in conjunction with your advisor, mentor, or committee, especially if this year will be your first submission. Abstracts must present original work that has not been previously published or presented at another professional meeting. Review the guidelines and important instructions for abstract submission on the GSA website at geron.org/abstracts. Begin working on your abstract in advance of the GSA abstract submission deadline of March 15 so you will have ample time to have your advisor/mentor and any co-authors review your work.

Submission requirements can vary by professional organization. Ensure compliance of your GSA abstract submission by visiting the link above and reading all instructions. There are a few GSA criteria that stand out. For example, GSA requires adding a “specific and measurable” objective to your abstract submission. These objectives identify what the audience will learn after listening to your presentation or reading your poster. Additionally, your abstract will have a word limit. Program overview (for symposia) and paper/poster abstract text is limited to 250 words. Individual symposium abstracts are limited to 150 words.

The abstract submission process allows you to select your preference of poster or paper presentation; however, you are not guaranteed one over the other until the abstract is reviewed and scored. You will need to indicate the GSA section by which your abstract will be considered (i.e., Behavioral and Social Sciences, Biological Sciences, Health Sciences, or Social Research, Policy and Practice). Please read the instructions to help you select the best fit between GSA section and your abstract topic. It helps to identify a GSA Interest Group that aligns with your work too; a list of groups can be found at www.geron.org/Membership. You also will need to choose the session code under which you would like your abstract reviewed. Session codes define the general research topic of your abstract. Update your C.V. prior to submission, as this document also will be requested during the submission process. Finally, there is a fee to submit your abstract. A symposium overview abstract costs $30 to submit (with no fee for submitting an individual symposium abstract); the discounted paper and poster submission rate for current students is $15.

Once you have submitted your abstract, it will be reviewed along a variety of criteria, including originality, specificity of methods and findings, online. Reviewers will rate your abstract on a scale of 1 (lowest) to 5 (highest) and the scores will be averaged to determine your status. The review process spans a few months, and you will be notified about abstract selection around mid-summer. If accepted, GSA will provide instructions on poster or paper presentation requirements, so be sure to check your e-mail and the GSA website for further information.

**Expert Advice**

Below you will find some valuable tips from GSA leaders on how to craft a successful abstract. Ken Ferraro, PhD, Chair of the Behavioral and Social Sciences Section, suggests avoiding the following three pitfalls to maximize your chance at success:

*No results to report.* Referring to results but not reporting them does not suffice. The submitter needs to have processed their core analyses by the time of submission.

*Insufficient detail.* Sufficient, clear detail is needed for reviewers to assess the potential contribution of the research. Without this, the reviewers may deem the research, or at least the abstract, as lacking careful preparation.

*Abstract is not ready for primetime.* The abstract needs to read well in addition to presenting quality research. The submitter should obtain critical reviews of their work before submission.

Immediate Past President Nancy Whitelaw, PhD, also emphasizes the importance of asking at least two experienced colleagues to provide feedback on your abstract. In addition, she notes the need to carefully review and closely follow the abstract submission instructions and criteria, and submit in advance of the deadline; the on-line submission process can be complex, and the on-line system can get very busy on the day of the final deadline.

Submitting an abstract to a scientific conference may appear daunting but is an immensely valuable experience. If your abstract is accepted, you will gain the essential skills of presenting and discussing your research among colleagues and potential future collaborators.

Even if the abstract is not accepted, learning the process of navigating the submission process adds to your foundation of research skills. You will also have prepared an abstract that can be submitted to another professional meeting and/or that can jumpstart the process of preparing a manuscript for publication.
Cuban Hospital Increasing Aging-Related Training
The Gustavo Aldereguia Hospital in the southern Cuban city of Cienfuegos is undertaking efforts to enhance its training school in gerontology. According to the director of the teaching hospital, the multifaceted process involves all medical specialties related to the treatment of older persons. Efforts are in place to form an aging-related type of hospital service that will assist the increasing number of patients in this age group admitted to this institution.

Gift Enables Brown to Establish Healthy Aging Initiative
Brown University’s Program in Public Health has received a gift from the Irene Diamond Fund to launch a major initiative on healthy aging. The program will work on identifying opportunities for preventive health interventions that can reduce care costs and improve the quality of life for older people. Through the initiative, Brown University will work with the Rhode Island Department of Health and community health providers to develop, test, and disseminate successful interventions. The Irene Diamond Fund Healthy Aging Initiative at Brown University will help support students and faculty who work on developing, testing, and disseminating preventive interventions, as well as fund innovations in the public health and medical curriculum so that more students can graduate with the knowledge needed to help the aging population. The Irene Diamond Fund has focused on aging in all of the gifts it recently announced and the share allocated to Brown University is the only one awarded to an institution located outside of New York City. Other beneficiaries include Weill Cornell Medical College, the American Federation for Aging Research, and Columbia University. The gift recognizes Brown’s leadership in aging research and teaching. The co-directors of the Brown initiative are former GSA President Terrie Wetle, PhD, and GSA Fellow Richard Besdine, MD. Brown and the Rhode Island Department of Health are already moving forward on the first pilot project of the initiative. This project will focus on the hundreds of older people around the state who are frequent users of 911 and emergency departments, having made at least four such costly and harrowing trips in a year. The initiative will work with the Rhode Island Department of Health and community health centers to identify strategies for improving health and reducing expensive emergency room visits and hospitalizations.

RAND is pleased to announce the 20th annual RAND Summer Institute (RSI), which will take place in Santa Monica, CA, July 8-11, 2013. The RSI consists of two conferences addressing critical issues facing our aging population: a Mini-Medical School for Social Scientists (July 8-9) and a workshop on the Demography, Economics Psychology and Epidemiology of Aging (July 10-11). The primary aim of the RSI is to expose scholars interested in the study of aging to a wide range of research being conducted in fields beyond their own specialties.

We invite all interested researchers to apply to attend the 2013 RSI. Applicants may apply for fellowship support to pay for registration, travel, and accommodations.

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

For additional information, please contact: Diana Malouf at malouf@rand.org.

RSI is sponsored by the National Institute on Aging and the Office of Behavioral and Social Sciences Research at the National Institutes of Health. RAND is an Equal Opportunity/Affirmative Action Employer.
AHRQ Solicits Next Round of Research Demonstration and Dissemination Grants
The Research Demonstration and Dissemination Grant (R18) is an award made by the U.S. Agency for Healthcare Research and Quality (AHRQ) to an institution/organization to support a discrete, specified health services research project. The research plan proposed by the applicant institution/organization must be related to the mission and portfolio priority research interests of AHRQ. AHRQ Research Portfolios include comparative effectiveness, health information technology, patient safety, prevention and care management, and value. The next application due date is May 25. Additional details may be obtained at grants.nih.gov/grants/guide/pa-files/PA-13-046.html.

Grants Target Senior Asthma
The National Institutes of Health is accepting Small Research Grant (R03) applications that propose to study the pathophysiology, epidemiology, diagnosis, and/or management of asthma in older adults. Much of what is known about asthma in adults is based on studies in younger adult populations; however, the mechanisms underlying asthma in some older adults may differ, which may impact on diagnostic, treatment, and prevention strategies. This opportunity is intended to stimulate research to address knowledge gaps and research opportunities in asthma in later life. A variety of study approaches are encouraged, including basic, translational, clinical, and epidemiological studies. Different types of projects may be supported by this mechanism, including pilot and feasibility studies; secondary analysis of existing data; small, self-contained research projects; development of research methodology; and development of new research technology. The R03 is intended to support small research projects that can be carried out in a short period of time with limited resources. See grants1.nih.gov/grants/guide/pa-files/PA-10-265.html for more information. There are several deadlines throughout 2013.

AoA Slates Funds for Disaster Assistance
A new funding opportunity from the U.S. Administration on Aging (AoA) for disaster assistance is available to provide disaster reimbursement and assistance funds to State Units on Aging (SUAs) and federally recognized tribal organizations who are currently receiving a grant under Title VI of the Older Americans Act. Awards made will be grants for a period of one year. The deadline date for submission of applications is September 13. Additional information may be found at www.aoa.gov/AoARoot/Grants/Funding/index.aspx.
The President and Provost of the Florida State University are pleased to announce an interdisciplinary initiative in the area of Successful Longevity. Our vision is an institute that promotes successful longevity through devotion to interdisciplinary research on healthy physical and cognitive aging across the lifespan. It would develop and translate knowledge about successful cognitive, exercise, nutrition, and technological interventions into practice, with the goal of maintaining and improving adult cognition, including well-being and independence. Sustained pursuit of collaborative, externally-funded projects is an explicit goal to be addressed by this initiative. To launch this initiative, we are seeking nominations and applications for a Director. This search is open with respect to rank and academic department. Successful candidates are expected to have a synergistic impact on existing research programs in the University’s departments and interdisciplinary centers as well as potentially open up new areas of study. The Director will have a unique opportunity to shape the direction of this Institute by recruiting a minimum of two additional faculty positions and a staff position. The Director will report to the Provost. Applicants should provide a vita, a letter discussing interest in the position and name, address, e-mail and phone number of three references. Application materials should be sent electronically to ctharp@fsu.edu. Nominations should be sent to the same address. Review of applications will begin March 1, 2013 and continue until the position is filled.
Canadians’ Retirement Age Similar Across Education Levels
Canadians with less than a high-school diploma can expect to live to the age of 82.5, whereas those with a postsecondary education can expect to live to 86, according to a new study from Statistics Canada. However, as reported in The Globe and Mail, in 2009 a 50-year old could expect to continue working for approximately 14 more years regardless of education level. Working lives have increased by approximately two years since 1998. This study’s findings correspond with a world-wide trend of people living longer and also working longer; however, this is reported to be the first time a study has described a shift of longer working lives using education levels while also using a new measurement tool to predict expected retirement dates. This expected later retirement may have a positive impact on labor concerns due to the baby boom generation’s move toward retirement, which may occur more gradually than predicted.

Japan’s Aged Population Committing More Crimes
The Japan Times reported in December 2012 that Japan’s 65-and-older population comprised nearly 16 percent of all criminal investigations in 2011, according to a recent white paper on crime. This level of criminal investigations among older adults is more than six times as high than it was 20 years ago. Although Japan’s population is aging, the crime for the entire population has been decreasing by approximately 6 percent per year, but elder crime is rising faster. This article indicated that although the majority of crimes committed by the elders involve theft, there were more assault-related crimes than previously seen in Japan.

Ireland’s Nursing Home Residents Experiencing Abuse
A recent survey of nursing home staff found that neglect and abuse of older people living in residential care is widespread in Ireland. On December 7, 2012, an article that appeared on IrishTimes.com reported that the majority of surveyed staff observed older people experiencing “neglectful acts” and 25 percent reported psychological abuse. According to this article, the survey was conducted by the National Centre for the Protection of Older People at University College Dublin and had 1300 nurses and healthcare assistants in nursing homes participate. Additional forms of abuse, such as financial and sexual abuse were also reported by respondents, but were a very small minority — less than two percent. The study identified low levels of job satisfaction, staff burnout, poor staff commitment to their employer, and stress in the organization as potential factors linked to the risk of neglect and abusive behaviors.
Optimal Aging Through Research

Call for Abstracts
Comprised of more than 3,000 presentations and up to 100 concurrent events per day, GSA’s scientific program is one of the most respected and competitive of its kind. The Call for Abstracts is your opportunity to be a part of this preeminent gerontological event of the year.

Abstract Deadline: March 15, 2013
Submit at geron.org/abstracts

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