Register Now for AGHE’s Meeting!

GSA’s educational branch, the Association for Gerontology in Higher Education, currently is accepting registrations for its 39th Annual Meeting and Educational Leadership Conference at www.aghe.org/am. This event — taking place from February 28 to March 3 at the Hilton St. Petersburg Bayfront in St. Petersburg, Florida — is the premier national forum for discussing ideas and issues in gerontological and geriatric education. The theme for 2013, “Waves of Change: Charting the Course for Gerontology and Geriatrics Education,” encourages potential presenters to explore new directions and models to address issues of concern and opportunities for strengthening gerontology and geriatric education programs.

GSA Sets Sights on Seniors’ OTC Product Behaviors

GSA is planning an April summit as the launch of a project aimed at understanding and optimizing over-the-counter (OTC) medication use among older adults. This effort is being conducted with support from the Consumer Healthcare Products Association (CHPA).

The summit will be steered by a joint GSA-CHPA workgroup, which is being chaired by former GSA Behavioral and Social Sciences Section Secretary-Treasurer Steven Albert, PhD, of the University of Pittsburgh.

“Few investigators have examined OTC behaviors. The new project will open up this black box of behavior,” Albert said. “We anticipate many changes and challenges in this evolving domain of self-care, and we need a cadre of people who understand OTC behaviors and can develop assessment tools and guidelines for consumers and clinicians.”

The workgroup currently is establishing the summit’s objectives, identifying participants, and reviewing existing findings. In addition to the workgroup, the invited summit attendees will include 15 to 20 stakeholder experts from industry, academia, research, and practice.

Albert said GSA is an ideal organization to lead this effort because of the diverse background and expertise of its members.

“Our GSA OTC workgroup includes experts in the psychology of aging, health literacy, software development for medication reconciliation, self-care, public health, packaging, and clinical pharmacy.”

The Summit itself will provide the framework and venue to evaluate the current available research.

Continued on page 6

GSA Takes Center Seat Within NIA Advocacy Organization

GSA Deputy Executive Director Linda Harootyan, MSW, has become the new chair of Friends of the National Institute on Aging (FoNIA), an independent, broad-based coalition of over 50 national aging, disease, and patient groups supporting the mission of the NIA. She was selected by the FoNIA Executive Committee.

FoNIA was established in 2005 to serve as a bridge between the NIA and supportive organizations and groups in order to promote and advocate for the NIA and its initiatives as public policies in health and research take shape. GSA was a founding member. By bringing together like-minded organizations to support the federal government’s leading aging research institute, FoNIA addresses current and future challenges in advancing public awareness and acceptance of research goals.

“This leadership role is a great opportunity for GSA and provides a mechanism to amplify the voices of GSA members,” Harootyan said. “The need to mobilize the research community to be strong advocates could not be greater.”

With federal budget sequestration a looming threat and declining National Institutes of Health (NIH) research budgets (as measured in constant dollars), the group had one of its most active years in 2012.

One of its major projects involved organizing a Capitol Hill Day in April during which teams met with key House and Senate staff to urge support for NIH and NIA and raised concerns regarding the potential implications of sequestration.

“As we move into 2013, the role of FoNIA will become even more critical to help sustain the research needed to make progress in attacking the chronic diseases that are driving massive increases in our national health care costs,” Harootyan said.

“Chronic diseases associated with aging account for more than 75 percent of Medicare and other

Continued on page 11
2013 Brings Age of Engagement

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

Happy New Year! If one of your resolutions included getting more out of your GSA membership, then you’re in luck. As part of GSA’s 2013 goals and objectives, we want to make sure we’re connecting with our members in an optimal fashion.

Those of you who attended our recent Annual Scientific Meeting in San Diego learned about the value of networking from our keynote speaker, James Fowler, PhD. In sharing the research behind his book, “Connected: The Surprising Power of Our Social Networks and How They Shape Our Lives,” Fowler demonstrated that we all are members of networks that may have a powerful influence on what are often interpreted as individual behaviors and personal choices. In the field of aging, I can think of no more powerful network than the one made up of GSA and its members.

To this end, the Executive Committee has approved the creation of a new staff position here at our Washington, DC, headquarters, a manager of social media and member engagement. At a basic level, that means we’ll be taking better advantage of tools such as Twitter, Facebook, and our website to communicate with members, share new research and other publications, and spread awareness of new GSA activities and opportunities. More broadly, we’ll be working on ways we can build networks to increase interdisciplinary collaboration among members and enhance mentoring activities.

To assist in these efforts, we’ve enhanced some of the resources we offer during GSA’s Careers in Aging Week, which is now entering its second decade. Each year, colleges and universities participate by sponsoring events at their schools or in their communities to bring visibility to the wide-ranging career opportunities in our field. This year, the week is taking place from April 7 to 13.

Perhaps you saw people wearing one of our “Proud Gerontologist” stickers in San Diego, steering people to careersinaging.com to learn more about becoming involved. I invite you to pay a visit to the website now to find out how we can help you host successful activities. GSA offers a limited number of cash awards to institutions for such purposes; the deadline to apply is February 15.

Also stay tuned later this year as we retool our Campus Ambassadors Program, which recruits an emerging scholar or professional to serve as a point person for GSA activities at his or her home institution.

You may recall that in 2009, we established a GSA Task Force on Mentoring. Since that time, its members have been involved in some very productive efforts and will continue to do so in 2013, as the task force has just been extended for another three years. Task Force Chair Ellen Idler, PhD, authored a piece in the October 2012 issue of Gerontology News encouraging all GSA members to actively seek out opportunities to serve as mentors, because “mentoring should be a continuous activity across the course of a career.”

So how would you like to become more engaged with GSA in the new year? Is it through mentoring? Or are you excited about the prospect of discussing the latest developments in the field through our social media channels? Drop me a line at jappleby@geron.org to let me know. Please also be aware that GSA is looking for members who wish to serve on the Society’s committees and task forces in 2014. Individuals interested in volunteering for these leadership positions should write to geron@geron.org with their name, CV, and committee or task force of interest. A list of GSA’s committees and task forces can be found at www.geron.org/governance.

Sincerely,

James
New Publications by Members


Members in the News

• In August 2012, Amber Watts, PhD, was interviewed by Reuters on the topic of dental health and its link to dementia risk. This story was picked up by MSNBC, News Feed Researcher, The Chicago Tribune, and several other sources. Watts also completed a radio interview on “Calgary Today.”
• GSA Fellow Cameron J. Camp, PhD, was quoted in an article about the use of Montessori Methods for the treatment of dementia in Le Monde on August 20, 2012.
• GSA Fellows David Ekerdt, PhD, and Karl Pillemer, PhD were both mentioned in The New York Times on August 20, 2012 with regards to quality of life results extrapolated from a national telephone survey of 2,250 Americans over age 60, called the “United States of Aging.”
• GSA Fellow Rafael de Cabo, PhD, was interviewed on NPR on August 30, 2012, about longevity and low calorie diets in primates. This story also appeared in the Los Angeles Times and The New York Times.
• GSA Fellow Tom Meuser, PhD, was profiled in the St. Louis Post Dispatch regarding his role as the director of the gerontology graduate program in the school of social work at the University of Missouri–St. Louis, and his work with the university’s Life Review Project, which pairs graduate students with seniors to record their life stories.

Member Spotlight

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

Noah Webster, 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:

Monika Ardelt, PhD

The recipient, who became eligible after referring new member Michel Ferrari, PhD, 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.

Ruiz Gets New Post at NCOA’s Self-Management Alliance

Sarah Ruiz, PhD, has been chosen as the deputy director of the National Council on Aging’s (NCOA) Self-Management Alliance. This initiative brings together business, nonprofit, and government leaders to develop self-management tools for millions of older adults, so they can play an active role in improving their own health. As part of NCOA’s Center for Healthy Aging, Ruiz will assist community-based organizations serving older adults in developing and implementing evidence-based health promotion and disease prevention programs. She is a public health activist for older adults and people with disabilities, and has served as a research fellow in population studies at the RAND Corporation and a research associate in health at IMPAQ International. She received her bachelor's degree from the University of Delaware and her doctorate in gerontology from the University of Southern California.

GSA Fellow Perkinson Receives Alumna Achievement Award

GSA and AGHE Fellow Margaret “Peggy” Perkinson, PhD received the Alumna Achievement Award from Saint Mary’s College on June 2, 2012. The annual Alumna Achievement Award honors an alumna who is outstanding in her personal and professional accomplishments and is a recognized leader in her field of endeavor. Perkinson is an internationally respected anthropologist and gerontologist who serves as associate professor at the Doisy College of Health Science at Saint Louis University. Throughout her career, Perkinson has researched a wide variety of topics, including exercise and dementia; grandparenthood and psychological well-being; the older worker in the new global economy; and the social dynamics of diabetes management. She received her bachelor of arts in humanistic studies at Saint Mary’s College, her master of arts in cultural anthropology from the University of Missouri and a doctor of philosophy in human development and aging at the University of California at San Francisco.

Wolf Honored by Institute of Senior Living Education

Mary Alice Wolf, EdD, a professor emerita in gerontology at the University of Saint Joseph and a fellow of both GSA and AGHE, was recently recognized by the Institute for Senior Living Education (ISLE) for her contributions to the field of gerontology and to the institute. Wolf was instrumental in building a partnership between ISLE and the University of Saint Joseph that resulted in the creation of the first geriatric care assistant certificate course in Connecticut.
The beginning of the new year prompts us to consider the actions of the previous one. This column is devoted to reflection on what issues, legislation, and aging-related activities fared well, or not, during 2012. In some ways, it was a “wasted” year on many aging issues because of the Congress’s inaction, the wait for the Supreme Court ruling on the Affordable Care Act (ACA), use again of the continuing resolution for funding, and the distraction of the election. Fortunately, with a new year come hope for progress and resolutions to do better.

What’s Out:

- **Four Tea Party favorites** have been denied plum committee assignments for “disloyalty to the party,” according to sources close to Speaker of the House John Boehner (R-OH): Representatives Tim Huelskamp (R-KS), Justin Amash (R-MI), Walter Jones (R-NC), and David Schweikert (R-AZ).
- **Senator Jim DeMint** (R-SC), who is a leading member of the Tea Party movement and often stopped progressive legislation in the Senate, is joining the conservative think tank The Heritage Foundation as its president.
- The ACA will not fund **partial Medicaid expansions**. “Consistent with the law, there is not an option for the enhanced match for a partial or phased-in Medicaid expansion,” declared acting Center for Medicare and Medicaid Services administrator Marilyn Tavenner. States must cover individuals up to 133 percent of the poverty line in order to receive the generous federal matching funds. In other words, it’s all or nothing.
- The **“normal” appropriations process** is no longer the norm. FY 2013 started on October 1, 2012. Since no agency spending bills were agreed upon both the House and Senate, Congress approved a continuing resolution, which funded the government for six months (through March 27). The resolution keeps the government running, but does so by default; there is little policy direction or guidance except for the status quo. “A CR causes an interruption in the flow of the ‘lifeblood’ of America’s enviable scientific research, the NIH, and National Science Foundation grants that fund much of the work done in university laboratories,” said Jean Morrison, provost and chief academic officer of Boston University. “NIH is allowing the use of only about 90 percent of some previously awarded grants under the current CR. In some cases, researchers may need to lay off technicians in coming months and scramble for support as they wait for their funding through final annual appropriations,” Morrison said. The consequences of governing by status quo include delaying construction projects, postponing maintenance needs, and for scientists and researchers, it may mean not trying more advanced or riskier experiments, delaying purchase of needed equipment, or the laying off of lab technicians and assistants. Ultimately, scientists and medical researchers may find better and more satisfying work in other global markets.
- The **following legislation** introduced in the 112th Congress is toast. Each session of Congress starts with a clean slate. All bills that did not become law must be re-introduced in the 113th Congress. Among the important legislation that has gone with the wind is:
  - **Older Americans Act Amendments of 2012**, S. 3562, as introduced by Senator Bernie Sanders (I-VT). This reauthorization bill contained many provisions that had been developed by senators, their staffs, and advocacy organizations working in concert to improve the aging services network. After more than two years of work, the Senate Health, Education, Labor, and Pensions Committee did not consider the bill. The House of Representatives never held hearings or introduced a comprehensive bill on the Older American Act.
  - **The Violence Against Women Act** reauthorization. Different versions passed in the House and the Senate in 2012 and no conference committee met to iron out differences in the bill. The Senate version included funding for elder abuse prevention, education, and training; the House did not.
  - **The Workforce Investment Act** reauthorization, H.R. 4297, as introduced by Representative Virginia Foxx (R-NC). Many of the original provisions have been consolidated in block grants, including the priority of service for low-income adults, disconnected youth, and individuals with barriers to employment.
  - **Other now-defunct aging-related bills include S. 150, Health Care and Training for Older Workers Act; S. 3465, Care Coordination for Older Americans Act of 2012; S. 3604, Improving Dementia Care Treatment for Older Adults Act of 2012; S. 891, Medicare Hospice Care Access Act of 2011; S. 462, Elder Abuse Victims Act of 2011; S. 2077, Elder Protection and Abuse Prevention Act; S. 1982, Strengthening Services for America’s Seniors Act; H.R. 3749, Expanding Opportunities for Older Americans Act of 2011; H.R. 773, Seniors Financial Fraud Prevention Act of 2011; H.R. 1897, Alzheimer’s Breakthrough Act of 2011; H.R. 4305, Child and Elderly Missing Alert Program; H.R. 6155/S. 3407, The Palliative Care and Hospice Education and Training Act.**
- **Health Insurance Exchanges.** Nineteen states have declined to create health insurance exchanges in their states, leaving it up to the Obama Administration to do that work. All of these states are led by Republicans.
- **CLASS Act.** The long-term care insurance program under the ACA was supposed to have been implemented starting in October 2012, but in 2011, Secretary Sebelius withdrew plans for CLASS’s implementation, so a farewell to the 112th Congress must contain a farewell to this effort…although some have not given up for a reworked CLASS in the future.

**Note for Advocates:** For those who supported any of the above legislative initiatives or others, all is not lost. Consider contacting...
the bill sponsor and your members of Congress to ask that they reintroduce the bill and cosponsor it in the 113th Congress. Our advocacy can help to secure consideration of these bills this year.

What’s In:
- “Obamacare.” Now that the president has been re-elected, this term for his signature piece of legislation is acceptable in polite company.
- The Affordable Care Act. With the Senate holding firm with a majority of Democrats after the November elections, the goal of many Republicans in the House to repeal health care reform will not be brought to fruition.
- Medicaid expansion under the ACA was ruled constitutional by the Supreme Court. Medicaid provisions slated to begin in January 2013 include increased payments to primary care providers as well as funding for state Medicaid programs that choose to cover preventive services graded “A” and “B” by the U.S. Preventive Services Task Force.
- The Center for Medicare and Medicaid Innovation (CMMI) at the Centers for Medicare and Medicaid Services is funding research and demonstration initiatives related to, among other things, care coordination, independence at home, dual-eligibles, and the health care workforce. Look to see if the results of these demonstrations can be implemented, otherwise funding for CMMI will be challenged.
- Health Insurance Exchanges. Seventeen states and Washington, DC, have opted to run their own health care markets. The exchanges are to go into effect in January 2014. They are to provide millions of Americans with access to affordable health care coverage.
- Electronic health records. Also under the ACA, health plans were required to start standardizing billing and adopting electronic health records.
- Speaker of the House John Boehner. Until his “Plan B” deficit reduction proposal had to be withdrawn for want of votes, it appeared that the speaker had successfully solidified his power in the unruly House by quashing rebellion and exerting some muscle. It appears now that he will need to rely on Democrats to give him the votes the far right won’t, but that probably won’t jeopardize his job.
- Representative Tim Scott (R-SC) will join the Senate, appointed by Governor Nikki Haley to replace Jim DeMint and become the first African American to serve as senator from the south since Reconstruction.
- Senator Barbara Mikulski (D-MD) will serve as the first female chair of the Senate Committee on Appropriations following the death of Senator Daniel Inouye (D-HI), the most senior senator at the time of his death.
- Lieutenant Governor Brian Schatz will be the new senator from Hawaii. Democratic Governor Neil Abercrombie appointed him to fill Inouye’s remaining two years and bypassed Representative Colleen Hanabusa (D-HI), whom Inouye had requested he choose.
- Fall Prevention in the Elderly. The Patient-Centered Outcomes Research Institute (PCORI) approved this topic as one of three targeted funding announcements to begin in Spring 2013. PCORI will seek research proposals on these topics that are especially meaningful to patients and those who care for them.

What’s Up in the Air (at press time):
- The Bush-Era Tax Rates expired at the end of 2012. What income level will be the maximum that will retain the lower rates — $250,000, $400,000, $1 million?
- Sequestration, across-the-board spending cuts that may go into effect on January 3. The NIH budget could be cut by about eight percent.
- Medicare Doc fix. Unless Congress acts, Medicare payments to doctors will be slashed by 27 percent in January.
- The unemployment insurance expired on December 31, 2012.
- Tax credits for things like research and development and the alternative minimum tax are awaiting full Senate approval before the package goes to the House.
- Labor, Health and Human Services, Education, and Related Agencies Appropriations. The continuing resolution funds the government until March 27. The Senate Appropriations Committee passed the Fiscal Year 2013 Labor, Health and Human Services, Education, and Related Agencies spending bill (S. 3295). The committee bill specified:
  - Flat funding for Health Resources Services Administration and Older Americans Act programs.
  - The spending level for the NIH was increased by $100 million and spending for community mental health and substance abuse prevention and treatment was increased by $40 million.
  - First-time funding of $8 million for the Elder Justice Act.
  - A $10 million increase over FY 2012 for the Corporation for National and Community Service.
  - $10 million for fall prevention under the Centers for Disease Control and Prevention and the Administration for Community Living.
- The House Appropriations Committee did not finalize a spending bill for Labor, HHS, Education, and Related Agencies. The House draft bill defunded the ACA, cut substance abuse and mental health funding, cut Older Americans Act funding, did not include any funds for the new EJA since it was passed as part of the ACA, and cut community service programs by 74 percent. The House Appropriations draft bill eliminates funding for the Agency for Healthcare Research and Quality and prohibits any funds for patient-centered outcomes research. Here are three of the possible scenarios in which the Health and Human Services budget could be funded:
  1. The continuing resolution could be extended to the end of the fiscal year, September 30. There could be funding modifications.
  2. A number of different appropriations bills could be combined to form an “omnibus” spending bill. Funding increases and decreases could occur.
  3. A less likely scenario is that an individual Labor, Health and Human Services, Education, and Related Agencies appropriations bill will be voted on and passed separately as a stand-alone bill.

Happy New Year and let’s hope and advocate for a better legislative 2013.
Diverse Family Caregivers Surveyed for New Report

AARP recently conducted qualitative research using a series of focus groups with Hispanic and African American family caregivers, nurses and social workers across the nation to gather more in depth information regarding these issues. The new “Meeting the Needs of Diverse Family Caregivers” report identifies family caregivers and defines their responsibilities, explores the needs of African American and Hispanic family caregivers, and finds common themes among African American and Hispanic family caregivers and related professionals, and offers solutions for improving both collaboration and communication among families.

New Research Examines Human Resource Impacts of Pensions

A new research brief examines the workforce impacts of existing defined benefit pension plans to assess the likely effects of a switch to defined contribution (DC) individual accounts or cash balance plans. “The Great Recession: Pressures on Public Pensions, Employment Relations and Reforms” reached several conclusions. Public employers would attract a different labor force if they switched retirement benefits away from pensions. Public employees would be less committed to employers and thus less likely to invest in nontransferable skills that are critical to delivery of taxpayer services. Employee turnover would increase under individual DC accounts and cash balance plans. These types of retirement benefits no longer defer compensation into the future and thus offer fewer economic incentives for employees to stay with public employers. Moving from a pension structure would result in higher cost for public employers and employees because of higher investment and administrative costs for alternative retirement plans. Public employers and employees overwhelmingly choose to stay with pensions rather than moving to alternative benefits when faced with a choice, illustrating the high value of pensions to public sector employers and employees.

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New resources

Brief Explores Title III Participants’ Transportation Services Use

The Administration for Community Living’s Administration on Aging recently released a research brief analyzing transportation use among Older Americans Act (OAA) participants. “Use of Transportation Services among OAA Title III Program Participants” found that older adults often associate their ability to remain independent with being able to travel outside the home. For many older Americans, this means being able to drive their own cars. Yet, due to chronic conditions, poor vision, and other illnesses, it often becomes unsafe for older adults to continue driving. Consequently, access to alternative forms of transportation becomes crucial for older adults to remain independent. The brief can be accessed at www.aoa.gov/AoARoot/Program_Results/docs/2012/AoA_6th_xatin_Brief_Oct_2012.pdf.

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The summit will utilize roundtable breakouts to address specific topics such as older adult awareness of OTC ingredients; drug-drug interactions with OTC products; pain management using OTC products; and the implications of vitamin and nutritional supplements. “The first response to common health problems is a trip to the local pharmacy and use of OTC medications,” Albert said. “More older adults use OTC than prescriptions — over a third on a regular basis, and more than 60 percent over the past six months — and an increasing number of prescription drugs are becoming available as OTC medications.”

Yet Albert said that the research community knows very little about the ways older people choose OTC medicines, how they take them, what they tell clinicians about OTC use, and how OTC medications interact with medical conditions or prescription medications.

GSA Sets Sights on Seniors’ OTC Product Behaviors

On April’s summit, scheduled to be a day-long event in Washington, DC, will result in a white paper of findings that will showcase current state of knowledge and outstanding research still needed. This report will serve as an authoritative summary and guide that helps address the problem by educating readers and helping to formulate opinion. Related entries in GSA’s WHAT’S HOT newsletter and From Publication to Practice series also are planned.

“Products from our project will be extremely valuable and are not being developed elsewhere,” Albert said. “These include recommendations on effective packaging and labeling, assessments of OTC health literacy, software solutions for tracking OTC behavior, guidelines for clinician-patient communication around OTC, and ways to involve family caregivers.”

OTC behavior is essentially self-management, with currently very little guidance to consumers and also little guidance from clinicians,” Albert said. “Ways to ensure safe and effective use would clearly be very valuable. To develop appropriate guidelines for consumers and reasonable strategies for clinicians and patients to discuss OTC will require expertise in every field in gerontology, from studies of packaging and decision-making to the sociology of self-care to clinical pharmacy and geriatric medicine.”

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Jennifer A. Palmer, MS

It has been a fun and productive year for ESPO and its leadership and members. We are grateful for everyone’s contributions both within ESPO and outside of ESPO, including GSA leadership and staff involvement. In order to keep the ESPO community informed of the accomplishments of the organization throughout the year, please find below a description of some of the progress made in 2012.

1. **Increasing the awareness and exposure of ESPO to existing ESPO members as well as to the society as a whole:** The ESPO executive committee has been working with GSA to identify avenues for engaging and building membership enthusiasm of ESPO members. To build upon an initiative started last year, the ESPO Executive Committee launched a campaign titled “I am an ESPO Member, Now What?” The campaign included:
   - Dissemination of post cards to ESPO members (via postal mail);
   - ESPO leaders wearing campaign buttons throughout the annual meeting as a way to be identified as colleagues who can answer questions about engagement and participation in ESPO;
   - ESPO Executive Committee members disseminating business cards with ESPO-related information at the annual meeting as a networking tool;
   - A one page advertisement in the annual meeting program book.

In addition, we have kept in contact with the ESPO membership via the quarterly e-newsletter and social media outlets, including Facebook (GSA Emerging Scholar and Professional Organization), and Twitter (@GSA_ESPO).

2. **Increasing number of award applicants for ESPO eligible awards:** The number of ESPO award applications has been low in recent years. The ESPO Executive Committee worked closely with ESPO section, committee, and task force representatives and GSA staffers to increase the awareness and participation of ESPO members in the award application process. We focused on educating the members about the options that were available in efforts to increase the number of applicants. Subsequently, the number of applicants increased in 2012 from the previous year.

3. **Increasing career development opportunities for ESPO members:** In an effort to meet overwhelming interest in the topic, the ESPO executive committee co-sponsored two career development symposia for the annual meeting. In addition, an ESPO Webinar Task Force has been developed to explore opportunities for a webinar series focused on career development.

4. **International Task Force:** This task force continues to move forward with efforts to connect emerging scholars and professionals across the globe. The aims of the group are as follows:
   - Facilitate informal networking opportunities which bring together both international ESPO members and ESPO members interested in international aging issues;
   - Undertake activities to increase the number of international ESPO members in GSA by connecting with gerontology student groups cross-nationally;
   - Undertake activities to identify career and research opportunities for both international ESPO members and ESPO members interested in international aging issues and communicate such opportunities through social media by working closely with the ESPO communications chair;
   - Serve as a liaison between international ESPO members, and the larger Emerging Scholars and Professional Organization.

5. **Newsletter Task Force:** This task force has worked cohesively since November in an effort to develop articles for the *Gerontology News* that are relevant and timely for ESPO members (e.g., presenting at GSA, careers in aging, making the most of your summer, international aging, and balancing work/family life). Please contact Jenny Palmer at japalmer@bu.edu to become a contributor to the article writing process.

6. **Campus Ambassador Program:** The 2012 Executive Committee worked with GSA staffers to revitalize and restructure the GSA Campus Ambassador Program. This program is a vital networking tool, linking students with an interest in gerontology on campuses all over the country and abroad. Campus ambassadors are encouraged to become actively involved in promoting opportunities in the field of aging on their campuses. If you are interested in becoming an ambassador, please contact Erin Smith at ekatesmith@ku.edu or Noah Webster at njwebs@umich.edu.

The overarching goal of all these efforts is to enhance the offerings of ESPO. Please join us in this process by volunteering for or running for future leadership positions within ESPO! One and all are welcome. Please e-mail us at espo@geron.org with any questions, comments, and to tell of us of your interest in getting involved.
Diverse Attendance

Approximately 4,000 people made their way to San Diego for GSA’s 65th Annual Scientific Meeting. Among them, 18 percent came from a total of 41 countries outside the U.S. The program featured more than 500 sessions during the five-day event at the San Diego Convention Center.

Among the most popular presentations were the Presidential Symposia, which showcased the meeting’s theme, “Charting New Frontiers in Aging.” Sessions in the Public Policy Series, which ran for its fifth year, also were widely attended in the aftermath of November’s national elections.

Unique Sessions

Educator and author James Fowler delivered the keynote address during the President’s Plenary Session. He spoke about the research outlined in his best-selling book, “Connected: The Surprising Power of Our Social Networks and How They Shape Our Lives,” which details the effect that social networks have on individuals’ emotions, health, relationships, behavior, and politics.

For the second consecutive year, GSA welcomed representatives of the National Council on Aging (NCOA) for a special day-long session. This time, NCOA’s Center for Healthy Aging brought together community-based providers, researchers, funders, and payers to discuss health care transformation and the role of research and academic partnerships.

On the final day of the meeting, GSA convened its first post-conference workshop, “Advancing an Agenda for Global Aging and Health,” which focused possibilities for transnational collaboration in gerontological research and education.

The photographs on the right give more details about these and many other unique events.

Looking Ahead

The Call for Abstracts for the 2013 Annual Scientific Meeting — taking place from November 20 to 24 in New Orleans — is now available on GSA’s website at www.geron.org/abstracts. The theme for this conference will be “Optimal Aging Through Research.” All abstract submissions must be received by March 15.
On Saturday Morning, several dozen conference-goers met at dawn for the third annual Fun Walk & Run, which is held in partnership with GSA’s Health Sciences Section to benefit the Doris Schwartz Gerontological Nursing Research Award.

Executive Committee members from GSA’s Emerging Scholar and Professional Organization (ESPO) donned “Ask Me About ESPO” buttons to familiarize newcomers with the advantages of becoming involved in the organization’s activities.

Outgoing GSA President Nancy Whitelaw handed over the reins to her successor, Laurence Rubenstein, at the conclusion of the Donald P. Kent and Robert W. Kleemeier Award lecture session.

The keynote address for Sunday’s post-conference workshop, “Advancing an Agenda for Global Aging and Health,” was delivered by Michael W. Hodin, who serves as a managing partner at High Lantern Group, an adjunct senior fellow at The Council on Foreign Relations, and the executive director of the Global Coalition on Aging.

Strong Media Presence

GSA issued press passes to 40 reporters in San Diego, including representatives from the Los Angeles Times, Forbes, TIME, the Dallas Morning News, The Times of London, and two NPR affiliates.

Among these press attendees were 17 new and nine returning participants in the MetLife Foundation Journalists in Aging Fellows Program, which GSA organized, for the third time, in conjunction with New America Media using funding provided by the MetLife Foundation. These reporters — chosen after a competitive application process — attended an educational pre-conference workshop, where GSA member experts shared facts and figures about the latest trends in gerontology. The fellows covered numerous topics at the meeting and in the coming months will produce longer stories on major issues facing older people. Half of the participants in the program represented media outlets with ethnic minority audiences.

Press Briefings

The Society also partnered with some of its prominent members and other authorities on aging to conduct a series of daily press briefings at the meeting. The first briefing offered an outlook on the future of the Social Security, Medicare, and Medicaid programs in the context of America’s current political climate. The second briefing featured new information on the challenges of family caregiving. Presenters in the third and final briefing shed light on the growing significant differences in U.S. life expectancy by race and educational level.

GSA in the News

The most widely distributed story to come out of the meeting focused on a presentation by Jennifer Ailshire of the University of Southern California. Her research found that living in areas of high air pollution can lead to decreased cognitive function in older adults.

Visit www.geron.org/press for links to news articles that resulted from sessions at the meeting. This page will be updated continuously as participants in the MetLife Foundation Journalists in Aging Fellows Program submit their stories in early 2013.
CAREERS IN AGING WEEK April 7-13, 2013

Careers in Aging Week (CIAW) is an annual event intended to bring greater awareness and visibility to the wide-ranging career opportunities in aging and aging research. Universities and colleges across the world participate by sponsoring events at their schools or in their communities. For more information, visit careersinaging.com.

2013 Key Dates and Deadlines
January......... Award Application Available
February....... Order Form Available
Award Application Deadline (2/15)
March.......... Order Form Deadline (3/21)

Sign up to receive e-mail alerts at careersinaging.com.
**Foundation Calls for Nurse Faculty Scholars**

**Applications**

The goal of the Robert Wood Johnson Foundation Nurse Faculty Scholars program is to develop the next generation of national leaders in academic nursing through career development awards for outstanding junior nursing faculty. The program aims to strengthen the academic productivity and overall excellence of nursing schools by providing mentorship, leadership training, and salary and research support to young faculty. Up to 12 awards of up to $350,000 each over three years will be available in this round of funding. Registered nurses with a research doctorate in nursing or a related discipline and who are junior faculty members in an accredited school of nursing with an academic position that could lead to tenure are eligible to apply. Both a primary nursing mentor and a senior researcher need to be identified. All candidates must be a U.S. citizen or permanent resident at the time of application and must not be receiving support from other research fellowships/traineeships at the time they begin the program. Candidates who are permanent residents and not green card holders should contact Johns Hopkins University School of Nursing before applying to determine whether they can satisfy the program’s eligibility and documentation requirements. Additional eligibility and further details can be found at pweb1.rwjf.org/applications/solicited/cfp.jsp?ID=21412&cid=XEM_A6503. The deadline for applications is February 12 at 3pm EST.

**NIH Solicits Nervous System Research**

The purpose of the EUREKA (Exceptional Unconventional Research Enabling Knowledge Acceleration) initiative is to foster exceptionally innovative research that, if successful, will have an unusually high impact on the areas of science that are germane to the mission of one or more of the participating National Institutes of Health (NIH) institutes. Applications addressing exceptionally novel hypotheses and/or remarkably difficult problems in neuroscience and disorders of the nervous system are solicited. This announcement is for support of new rather than ongoing projects, and is not intended for pilot research. The research should be groundbreaking, innovative, original and/or unconventional, with the potential to solve important problems or open new areas for investigation. Before submitting an application, it is extremely important to verify that the proposed research is of interest to at least one of the NIH Institutes that are participating in this funding opportunity announcement, since applications that are not relevant to the mission of one or more of the participating institutes will not be reviewed. The four institutes participating (the National Institute of Neurological Disorders and Stroke, the National Institute of Mental Health, the National Institute on Drug Abuse, and the National Institute on Aging) are offering varying amounts of funds. Applications are due March 21. Visit http://grants.nih.gov/grants/guide/notice-files/RFA-NS-13-007.html for additional details.

**Funds Slated for Organ Transplant Studies**

The National Institute on Aging is inviting applications that propose basic, clinical, translational, epidemiological, and outcomes research on solid organ transplant (SOT) in older persons. Research may focus on, but is not limited to appropriate selection of older SOT donors and recipients; improved management of older SOT recipients; immunology and immunosuppression pertaining to older SOT patients; and healthcare disparities, utilization, and costs of SOT in older patients. Research supported by this initiative is expected to enhance knowledge of immunobiology in aging and transplantation, and to provide evidence-based guidance to improve access to transplantation, organ allocation and utilization, graft survival, and short- and long-term outcomes of SOT in older persons. Review grants.nih.gov/grants/guide/notice-files/RFA-NS-13-007.html for more information. This funding opportunity expires January 8, 2016.

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**Continued from page 1 - GSA Takes Center Seat Within NIA Advocacy Organization**

federal health expenditures. GSA is also working with other non-profit organizations on an international effort to bring private philanthropy and investment to the table to complement the public dollars.”

In December 2012, FoNIA members met with NIH Director Frances Collins, MD, PhD, to urge him to include $1.4 billion (an increase of $300 million) for the NIA in the FY 2014 NIH budget. Then-FoNIA Chair Mary Jo Hoeksema presented Collins with an official letter making this request, signed by more than 500 researchers representing a broad range of disciplines and career stages.

To keep up to date on the NIA’s research portfolio, FoNIA representatives recently visited the NIA’s Baltimore Longitudinal Study on Aging (BLSA) headquarters, and were given a personalized tour by GSA member Luigi Ferrucci, MD, PhD, director of the NIA’s Intramural Program.

The BLSA is the only one of its kind in the world. Since 1958, a total of more than 1,400 volunteers have agreed to regularly undergo in-depth physicals and memory and other screenings conducted by the study’s physicians. The resulting data span more than half a century and present a tremendous amount of data for researchers interested in the aging process.

Harootyan herself has been part of the study for over a decade. “Because of the BLSA, scientists know that signs indicating that a person could be at risk for dementia and other cognitive diseases may appear 20 years before symptoms emerge,” she said. “Findings that today are common knowledge — that exercise can help reduce high blood pressure, for one — can be traced back to BLSA’s annual physicals and the data analysis done by the study’s scientists.”
Assistant/Associate Professor
SmartHOME: Community & Social Support for Older Adults

The University of South Carolina invites applications for a tenure-track faculty position at the rank of assistant or associate professor in the College of Social Work. This position is part of a cluster hire for the SmartHOME Initiative in the SeniorSMART Center of Economic Excellence (www.seniorsmart.org/). SmartHOME has the goal of enabling older adults to stay in their own homes longer through the use of technology enabled products, services, and environments. Faculty will have an academic home in the College of Social Work and be expected to develop an independent research agenda that will contribute to the goals of the SmartHOME initiative.

The successful applicant will have a doctoral degree in social work or a health/mental health related field, a background in aging and health/mental health, a demonstrated commitment to interdisciplinary teamwork, a promising or significant record of competitive extramural funding and independent research, and strong methodological skills.

Inquiries about this position may be made to Dr. Anna Scheyett, Dean, College of Social Work at anna.scheyett@sc.edu. Questions about the SmartHOME Initiative may be directed to Dr. Sue Levkoff, SmartHOME Endowed Chair at slevkoff@mailbox.sc.edu. The search committee will begin reviewing applications immediately and continue until the position is filled. A full description can be found at: http://cosw.sc.edu/employment.

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Call for Postdoctoral Fellowship Applications in the Social, Medical, and Economic Demography of Aging

ELIGIBILITY
Applicants must have completed a doctoral degree in one of the social, behavioral, or policy sciences before beginning the fellowship. Training in demography or a commitment to acquiring such training in the postdoctoral appointment is essential. Fellows will be selected on the basis of academic excellence, prior record of accomplishments, potential to bring diverse ideas and experience in demography to Duke University, ability to interact successfully with a broad range of faculty members, and compatibility of research and interests with a sponsoring mentor. Applicants must be U.S. citizens or permanent residents.

APPLICATION INFORMATION
Applicants should send a letter of application, curriculum vita, and samples of research writings electronically to Administrative Director, Heather Tipaldos, Duke Population Research Institute; email: heather.tipaldos@duke.edu. In the letter of application, please describe your research interests, an appropriate mentor for your training, and what you would hope to accomplish during your postdoctoral fellowship. Also required are three letters of recommendation. We prefer to receive recommendations via email.

Application Deadline
Postdoctoral appointments typically occur between May 15 and August 31, although there is some flexibility. Electronic applications must be received by Monday, January 28, 2013.

If additional slots are available, we will review late applications after March 1, 2013.

To view the full announcement, please visit: http://dupri.duke.edu/pdfs/Call_for_NomT32-100812.pdf
China’s Workforce Expected to Significantly Decline

China’s workforce is expected to start declining beginning in 2015. The population is quickly aging, and its one-child policy that began in the 1970s is starting to affect its workforce. CNBC reported on October 25 that those entering the workforce will decline by 30 percent in the year 2020, compared to 2010. The number of those aged 65 years and above is estimated to increase by more than 100 million, and more than a quarter of the population will be over the age of 65 years by 2050. Since 1990, the country’s working age population (those aged between 15 and 64) grew from 66 percent of China’s total population in 1990 to more than 72 percent in 2010, which contributed to the nation’s economic rise, when it grew at an average rate of nearly 10 percent annually. However, China’s working age population is expected to decline to 61 percent of the total population by 2050, according to the United Nations. In addition, China’s youth may be hesitant to accept low-paying factory jobs that have long working hours and are under some unfavorable conditions, which previously fueled China’s reputation as a manufacturing capital.

Report Evaluates Ireland’s Care Assessment Methods

As reported via IrishTimes.com, the aging of Ireland’s population is creating some challenges for both the island’s northern and southern governments. Recent research funded by the Centre for Ageing Research and Development in Ireland indicated that the care assessment system in the Republic of Ireland is less effective than Northern Ireland’s because it leaves a higher proportion of older people with unmet care needs. The authors of this report, from Trinity College Dublin and Queen’s University Belfast, said that there is a legal basis for home help services and an integrated system to assess people’s needs for care at home or placement in a care home in Northern Ireland, whereas, in the Republic, this form of assessment only applies in certain situations. The number of those aged 65 and over will increase to 15 percent within a decade, and those aged 80 and older, who are more likely to be in need of care, will increase by 53 percent in 2021. This leads to questions about who will provide this care, and provides thoughts about an integrated assessment system in the Republic.

Geriatrics Institute Opens in Singapore

To actively address the needs of Singapore’s aging population, Singapore’s National Healthcare Group has created the Institute of Geriatrics and Active Ageing (IGA). According to Channel News Asia, the new facility is an all-inclusive center housed in a local hospital that will bring those with different medical specialties together to help care for older people. They will collaborate with three medical schools to increase the value and importance of geriatric education. The IGA will assist in establishing future geriatric care and innovative care models, while also allowing healthcare professionals to conduct research. The core areas of the IGA will include clinical, technology, living environment, and industrial design. The center also will be a place for medical professionals and service providers to convene and discuss education, research, and needs of the aging population.

Germany Finds Growing Population of Older Adults with Addiction Problems

A new report from the German government indicates that as the country’s population ages, the number of older alcoholics is expected to rise. The study found that one-third of alcoholic elders are previous addicts that aged, while there are also those who were previously alcoholic and abstained from alcohol, but then began drinking again when they got older. It estimated that on average, 7 percent of Germans under in-patient treatment are addicted to medication, while 8 percent are alcoholic. As reported by Deutsche Welle on September 10, addiction is often viewed as a shameful behavior rather than an illness among the 80-plus population in Germany. The government is supporting a project that provides support for older individual with addiction issues. It regularly rotates old-age home workers in Germany with addiction support center workers in an effort to improve training and nursing personnel on the unique characteristics of older individuals with addiction problems.

**Rand Summer Institute (RSI)**

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.
Fellow status is an acknowledgment of outstanding and continuing work in the field of gerontology. This recognition can come at varying points in a career and can acknowledge a broad scope of activity, including research, teaching, administration, public service, practice, and notable participation within the Society.

Potential candidates must:
• Get a nomination letter from a current GSA fellow of the candidate’s section. Self-nominations are no longer accepted.
• Get an endorsement letter from one other fellow of the candidate’s section (both must be members in good standing).
• Be a regular GSA member for a minimum of five years.
• Meet the specific requirements made by the candidate’s section.
• Submit a current C.V.

Nominations will be accepted until February 15. Visit www.geron.org/Membership/Fellows for details.
MU Sinclair School of Nursing Receives Nearly $15 Million for Project to Reduce Re-hospitalizations

The University of Missouri (MU) Sinclair School of Nursing has received a $15 million grant from the U.S. Department of Health and Human Services Centers for Medicare and Medicaid Services (CMS). MU researchers, led by GSA member Marilyn Rantz, PhD, RN, FAAN, will use the funds to implement a project aimed at reducing avoidable re-hospitalizations among nursing home residents. Insights gained from this project could provide a nationwide model for senior care and significantly reduce national health care spending. MU will partner with CMS and state Medicaid programs to improve care for residents at 16 nursing facilities in St. Louis. The MU researchers will oversee the project, and using grant funds, the team will recruit and place one advanced practice registered nurse (APRN) at each of the nursing homes. APRNs receive specialized post-graduate education in nursing. The APRNs will work with nursing facility staff and residents’ health providers to coordinate patient care and improve the recognition, assessment and management of conditions that are common causes of hospitalizations for aging adults. The APRNs at each facility will work with a traveling interdisciplinary team consisting of a master’s-trained social worker, an information technology specialist, a medical director and an APRN with specialized knowledge of INTERACT II, a quality improvement program designed to monitor and improve aging adults’ health.

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.

Correction

The October 2012 issue of Gerontology News reported on a multi-year grant given to New Mexico State University’s (NMSU) College of Health and Social Services from the U.S. Health Resources and Services Administration in order to train nurses in comprehensive geriatric education. This piece neglected to mention that the project is being led by GSA and AGHE Fellow Donna L. Wagner, PhD, who serves as the associate dean for academic affairs in the College of Health and Social Services.
January 2013
printed in the U.S.

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

GSA Annual Scientific Meeting
New Orleans • Louisiana
November 20–24, 2013
Sheraton New Orleans • New Orleans Marriott

This Continuing Educational activity is jointly sponsored by The Annenberg Center for Health Sciences at Eisenhower and The Gerontological Society of America.