NIH Budget Proposal Spurs New Drive for Advocacy

The National Institutes of Health (NIH) may see a $1 billion increase in its FY 2012 budget, thanks to a recently introduced draft funding bill from the House Appropriations Committee. The measure, developed by the Subcommittee on Labor, Health and Human Services, and Education, would provide NIH with $31.7 billion in program funding. This is 3.3 percent higher than last year’s level and matches the president’s FY 2012 budget request.

Representative Denny Rehberg (R-MT), chair of the subcommittee, has requested online feedback on the new budget proposal at bit.ly/qhoAzq.

The draft bill was introduced just as GSA completed its first Take Action Week, which was designed to help Society members set up advocacy meetings with elected officials — to urge them to secure funding for aging research and education, as well as reauthorize the Older Americans Act. In preparation, GSA developed a number of new resources for its online policy center at www.geron.org/advocacy.

“Now that an NIH budget increase has been proposed by the House, GSA members must continue their advocacy efforts to make sure the increase remains in the final appropriations bill,” said GSA Policy Advisor Brian W. Lindberg, MMHS. “Contacting the Senate in support of the House funding level could be very helpful. The tools we developed for Take Action Week will allow members to get in touch with their congressional offices and make their voices heard.”

Among the new materials on the GSA website is a downloadable webinar led by Lindberg in September. In it, he walks participants through the steps of contacting legislative offices, setting up meetings, and using specific talking points support of federally funded aging research.

In mid-October, Representatives Ed Markey (D-MA) and Brian Bilbray (R-CA) circulated a sign-on letter to fellow House members in support of the FY 2012 funding level for the NIH. The letter, addressed to the Appropriations Committee leadership, also states that NIH support should not come at the expense of other programs that supplement the work of the NIH. Although the NIH budget would see a boost in FY 2012, the draft funding bill does call for cuts...
The past year was a productive one for our Society and, as we prepare to gather en masse for our Annual Scientific Meeting in Boston, I feel this is a great time to celebrate our many successes. A short list of noteworthy 2011 happenings is listed below.

**Advocacy Efforts Grow:** In 2011, the Society enabled members to make their voices heard. One of our webinars allowed GSA members to address questions to the director of the National Institute on Aging (NIA); he responded by saying that the NIA had been able to increase its payline for grant applications for the first time in several years. In September, GSA’s first Take Action Week gave members the tools to have successful advocacy meetings with their representatives and senators. GSA also sponsored a well-attended congressional briefing that outlined the struggles of low-income older workers.

**Bridge Building Increases:** GSA teamed up with several other aging organizations in 2011. As invited guests of Pfizer, Inc., we joined forces with the American Geriatrics Society for a major event to outline the future of geriatric medicine and health needs. At GSA’s Annual Scientific Meeting, GSA, the American Aging Association, and the American Federation for Aging Research are, for the second time, co-sponsoring a special session on the biology of aging. The National Council on Aging also will join us in Boston for a day of special sessions, culminating with a presentation by U.S. Assistant Secretary for Aging Kathy Greenlee.

**Corporate Advisory Panel Forms:** GSA strengthened partnerships in the private sector through the formation of a Corporate Advisory Panel. This new group is designed to extend the reach of Society members’ collective expertise and develop new collaborations. It will work strategically with GSA to tackle the issues and challenges being placed on industry, government, the healthcare system, communities, families, and individuals in our aging society.

**Innovation Fund Provides Return on Investment:** Thanks to member contributions, the new GSA Innovation Fund supports the creation of new products, programs, and services. Among its first sponsored initiatives were GSA’s Take Action Week and an advocacy training webinar; grants for institutions to support Careers in Aging Week activities; the interactive webinar with the director of the NIA; and a webinar on designing effective poster presentations.

**Annual Scientific Meeting Submissions Climb:** The number of abstracts submitted for our Annual Scientific Meeting was 14 percent higher than in 2010. This suggest we also will have strong attendance figures. This increase gave us the opportunity to put a greater emphasis on posters and the value of the science they contain.

**Journals’ Status Rises:** When Thompson Reuters’ Journal Citation Reports: Social Sciences Edition issued its latest impact factor ratings this summer, GSA dominated the Gerontology category. Our Journals of Gerontology Series A took the top spot, and the Journals of Gerontology Series B and The Gerontologist were both in the top eight.

**Reporters’ Fellowship Program Expands:** Our grant supporting the MetLife Foundation Journalists in Aging Fellows Program was renewed for a second year, allowing an increased number of reporters to participate in our Annual Scientific Meeting and spread the word about the research presented there. We will welcome 16 new fellows and 10 returning fellows to Boston. GSA’s website will host their stories as they are published.

I look forward to discussing these and many other items with GSA members at the Boston meeting.

James Appleby, RPh, MPH

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**From the Executive Director**

The Year in Review: A Boston Primer

By James Appleby, RPh, MPH

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November 2011 • gerontology news
New Publications by Members


Members in the News

• Several news outlets carried a Business Wire press release that featured GSA member Ron Ozminkowski, PhD and his new study in the Journal of Gerontological Nursing, “The Burden of Falling on the Quality of Life Among Adults with Medicare Supplement Insurance.”
• GSA Fellow and current editor of the Journal of Gerontological: Biological Sciences Rafael de Cabo, PhD, was recognized on CBS News for his work on obese mice. He was part of a team that designed a drug that significantly extends the lifespan in obese mice.
• The United Press International covered a recent article published by Alison Chasteen, PhD, in the Journal of Gerontology: Psychological Sciences. This study found that older adults had more positive feelings than the younger adults did toward those who used anti-aging techniques, but both groups viewed mild methods more favorably than major methods such as Botox.

Member Spotlight

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

Candace S. Brown, MAG, MEd

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

Colleague Connection

During September’s Membership Month, the Colleague Connection program was expanded to reward all individuals who referred new members to the Society.

See the complete list of participants on page 4. For more details on the Colleague Connection promotion, which includes a chance to win free lodging at the Annual Scientific Meeting, visit www.geron.org/connection.

Fulmer Appointed Northeastern’s Health Sciences Dean

Former GSA President Terry Fulmer, PhD, has been appointed dean of the Bouvé College of Health Sciences at Northeastern University. The college is a center of excellence in health education, research, and service. It offers many undergraduate and graduate programs with an interdisciplinary focus on health care. Fulmer previously was affiliated with New York University, where she served as the founding dean of the College of Nursing, co-director of the John A. Hartford Foundation Institute for Geriatric Nursing, and co-director of the Consortium of New York Geriatric Education Centers. She is the 2011 recipient of GSA’s Doris Schwartz Gerontological Nursing Research Award.

Jarrott Receives Award for Article in The Gerontologist

GSA Fellow Shannon E. Jarrott, PhD, has been named a co-recipient of Generations United’s Brabazon Award for Evaluation Research. This distinction recognizes significant contributions to the field of evaluation research in the intergenerational field. The award was given based on a recent paper she co-authored in The Gerontologist, “Complement of Research and Theory in Practice: Contact Theory at Work in Non-Familial Intergenerational Programs.” Jarrott currently is an associate professor at Virginia Polytechnic Institute and State University.

American Sociological Association Recognizes Hendricks

GSA Fellow Jon “Joe” Hendricks, PhD, has received the Matilda White Riley Distinguished Scholar Award from the Aging and the Life course Section of the American Sociological Association. The award honors a scholar in the field of aging and the life course who has shown exceptional achievement in research, theory, policy analysis, or who has otherwise advanced knowledge of aging and the life course. Hendricks is a former chair of GSA’s Biological Sciences Section and a former president of the Society’s educational branch, the Association for Gerontology in Higher Education (AGHE). He is a previous winner of GSA’s Robert W. Kleemeier Award, the Richard Kalish Innovative Publication Award, and the Distinguished Career Contribution to Gerontology Award. In 2004, he earned AGHE’s Clark Tibbitts Award. He currently holds the position of dean emeritus of the University Honors College at Oregon State University.

Bottomley Given APTA Honor

Jennifer Bottomley, PT, MS, PhD, an independent geriatric rehabilitation program consultant, advisor, and educator in West Roxbury, MA, has received the American Physical Therapy Association’s (APTA) 2011 Lucy Blair Service Award. She was honored during an awards ceremony during APTA’s Annual Conference and Exhibition in June. 2011.

Life Lessons Found through the Legacy Project

GSA Fellow Karl Pillemer, PhD, and several colleagues recently launched the Legacy Project blog, which provides insight about living better, happier lives and philosophies of living. These life lessons were gathered from more than 1,200 older adults. More information about the Legacy Project can be found at legacyproject.human.cornell.edu/. Pillemer was the 2010 winner of GSA’s M. Powell Lawton Award. He currently is the Hazel E. Reed Professor of Human Development in the College of Human Ecology and professor of gerontology in medicine at Weill Cornell Medical College.
Membership Drive Extends GSA Family

During September’s Membership Month, GSA awarded a $25 Amazon.com gift card to anyone who referred a new member to join the Society. As a result, 118 new people were recruited. GSA congratulates all the participants and extends a warm welcome to its newest members! The gift card winners are listed below:

Iris Aguilar (referred William Vega)
Cecilia Albala (referred Hugo Sanchez)
Donna Algase (referred Cheryl Gies)
Richard M Allman (referred Grant Savage)
Tamara Baker (referred Elizabeth Grubert)
Sue Berger (referred Jennifer Kaldenberg)
Suzanne C. Beyea (referred Stephen Bartels)
Susan Bluck (referred Caitlan Tighe)
Sally Bould (referred Roxana Eleta De Filipps)
Elisabeth Burgess (referred Erin Fisher)
Thomas Caprio (referred Craig Sellers)
Laura Carstensen (referred Kenneth Smith)
Diane Chau (referred Roxana Aminbakhsh)
Yiwei Chen (referred Jiaxi Wang)
Corjena Cheung (referred Carol Geisler)
Oi Wah Esther Chow (referred Alice Ming-lin Chong)
Ed Cisek (referred Nancy Lee Hendley)
Phillip Clark (referred Greg Thoelke)
Maria Claver (referred Christine Thayer)
Jennifer Crittenden (referred David Wilhry)
Alice Cronin-Golomb (referred Ivy Miller)
Krystal Culler (referred Ruth Walker)
Margie De La Cruz (referred Nihan Kayaardi-Hinojosa and Minerva Zapata)
XinQi Dong (referred Melissa Simon)
Daniel Durkin (referred Kristy Durkin)
Elizabeth Eckstrom (referred Kathie Lasater)
Linda Edelman (referred Shawnie Holt)
Charles A. Emlet (referred David Brennan)
Michal Engelman (referred Joshua Garoon)
Kendra N. Erickson-Dockter (referred Ramona Danielson)
Karen Feldt (referred Kim Friedli and Sean Kelly)
Kenneth F. Ferraro (referred Patricia Morton)
Dolores Gallagher-Thompson (referred Paula Alvarez and Johanna Rengifo-Navarret)
Josho P Gesino (referred Meaghan Gesino)
Allen Glickman (referred Michelle Mamberg)
James Grealy (referred Christine Grafiti)
Carmen Green (referred Ashley Green)
Jennifer Greenfield (referred Jooyoung Kong)
Gloria Gutman (referred Heather Stewart)
Sarah Hallen (referred Heidi Wietman)
Terri Harvath (referred Basia Basin and Quin Denfeld)
Linda Hassing (referred Marcus Praetorius)
Jessica Hellerstein (referred Ashley Harland)
Christopher Herzog (referred Katherine Umberson)
Scott Hofer (referred Philippe Rast)
Christiane Hoppmann (referred Darren Wong)
Patricia Housey (referred Robert Kennison)
Hui-chuan Hsu (referred Ling-Yen Pan)
Cynthia S. Jacelon (referred Qiaoohong Guo)
Mimi Jacobs (referred Travis King)
Samantha John (referred Brenna Renn)
Timothy L. Kaufman (referred John Bar)
Julie E. Kaufman (referred Mary O’Donnell)
Candace Kemp (referred Yarkasah Paye)
Gerard Kerins (referred Lina Toledo-Franco)
Steven J. Kohn (referred Savannah Spivey and Maria Willis)
Christine Liu (referred Jessica Eng)
Beverly Lunsford (referred Dale Lupe)
Marilu Luptak (referred Jeff Spears)
Claire Luz (referred Deborah Sleight)
Bo Malmberg (referred Sigurgeir H Sigurardottir)
Eileen Malone-Beach (referred Renee Babcock)
Lydia Manning (referred Collin Mueller)
Leni Marshall (referred Cynthia Port)
Ben Mast (referred Matthew Schrock)
TJ McCallum (referred Jessica Alva)
Graham McDougall (referred Cynthia Green)
Marty Mezey (referred Joan Stanley)
Susan Miller (referred Jessica Loosee)
Michelle Mlinac (referred Margaret Murphy)
Christine Mueller (referred Heather Davila)
Xi Pan (referred Wenzhuan Huang)
Marti Parker (referred Marten Lagergren and Gail Madjzoub)
Anabel Pelham (referred Dorothy Guajardo)
Elyse Perweiler (referred Nina Tiumosa)
Mari Plikuhn (referred Daniel Caruana and Rebecca Reeves)
Lauren Popham (referred Paul Dennis)
Alecs Puchnicki (referred Rolf Martin)
M. Carrington Reid (referred Allison Nickerson)
Gary Reker (referred Cheryl Menmon)
Andrew Revell (referred Laura Campbell)
Virginia Richardson (referred Robert Klein)
Karen A. Robert (referred Stefan Pasymowski)
Erlene Rosowsky (referred Katherine King)
Laura Sands (referred Shuang He and Danni Yu)
Shao-mei Shang (referred Shu-xiao Hou and Zhi-wen Wang)
Shoji Shinkai (referred Yu Taniguchi)
Denise Short (referred Maria Cordeiro)
Merril Silverstein (referred Richard Wiggins)
Nina Silverstein (referred William Perry)
Erin Katesmith (referred Magdalena Szumaska)
Jacqui Smith (referred Richard Gonzalez)
Elisabeth Steinwagen-Thiessen (referred Ilja Demuth)
Sara Stemen (referred Emily Fox)
Mark Supiano (referred George Rodway)
Amanda Szabo (referred Emily Mailey and Erin Olson)
James Teufel (referred Peter Holgrave)
Toby Turner (referred Alicia Clark)
Hilde Verbeek (referred Sandra Zwakhalen)
Dominique Verté (referred Liesbeth De Donder)
Joyce Wang (referred Hannah Giasson)
Gerben Westerhof (referred Ernst Bohlmeijer)
Sharon Stahl Wexler (referred Marie Charles)
Nancy Whitelaw (referred Rosanne DiStefano)
Tobias Wilson (referred Allyson Graf)
Irene Yen (referred O. Kenrik Duro)
Richard Zweig (referred Kaori Kato)
A Guide to the GSA Annual Scientific Meeting Policy Series

This column is devoted to the sessions that will be featured in GSA’s popular Policy Series at the Annual Scientific Meeting in Boston. They reflect timely topics challenging the field of gerontology and feature some of the foremost researchers, policy analysts, and aging advocates in the nation. In addition to presentations on Social Security, Medicare, and the Older Americans Act reauthorization, we’re premiering a training event for GSA members to learn how to communicate effectively with policy makers. And once again we’ll be joined by Capitol Hill staffers, who will update our members on the year’s legislative developments and the outlook for 2012. Make sure to check your conference bag for the special yellow insert that details these and many other policy-related sessions in Boston.

Older Americans Act Reauthorization: Four Ideas for Innovation • Friday, November 18 • 4:30 to 6 p.m. • Fairfax A & B (Convention Center) • The reauthorization of The Older Americans Act provides an important opportunity to adapt its legislation to the changing needs of an increasingly healthy, diverse, and aging America. This interactive symposium will put forth four innovative ideas for discussion. Moderated by Bob Blancato, a long-time aging policy expert in Washington, DC, the panel will include Howard Bedlin of the National Council on the Aging, Association for Gerontology in Higher Education Janet Frank, Tony Sarmiento from Senior Service America, Inc., and Brian Lindberg, representing the Age4Action Network.

Medicare and the Deficit — A Debate About Solutions • Saturday, November 19 • 1:30 to 3 p.m. • Hynes 202 (Convention Center) • This session will present differing perspectives on how best to control the growing cost of the Medicare program in light of the looming federal deficit. John Rother of the National Coalition on Health Care will moderate. Other presenters include Patricia Neuman from the Kaiser Family Foundation, William Hall from the University of Rochester Medical Center and MedPAC, and Robert Blendon from the Harvard School of Public Health.

Finding Your Voice: Advocacy Training for the Everyday Researcher • Saturday, November 19 • 3:30 to 5:30 p.m. • Hynes 202 (Convention Center) • With the current economic climate threatening to cut crucial funding, your voice is needed to make the case for investing in research both locally and in Washington. This extended session will feature an overview of the current research funding crisis, give tips on how to set up and prepare for a congressional meeting, and provide training on framing your work and communicating effectively to policy makers. Experts in policy and advocacy will also lead a small group practice exercise to perfect your message. This extended session, chaired by GSA’s National Academy on an Aging Society Director Greg O’Neill and moderated by GSA Policy Advisor Brian Lindberg, will provide you with essential tools to become an advocate for research funding and other aging services.

Saving Social Security: Is Raising the Retirement Age the Answer? • Sunday, November 20 • 8 to 9:30 a.m. • Hynes 200 (Convention Center) • This GSA Public Policy Committee symposium, co-chaired by Robert Hudson and Sara Rix, will bring together experts from all four sections of GSA and from the women’s and minority task forces to examine the impact of raising the eligibility age for full Social Security benefits. This symposium builds on the Spring 2011 issue of Public Policy & Aging Report on this topic. Ample opportunity will be provided for audience discussion of what has proven to be a very thorny, and hot, political issue.

Social Security — You Fix It! • Sunday, November 20 • 1 to 2:30 p.m. • Hynes 202 (Convention Center) • This hands-on session will involve a fun and informative exercise to find solutions to the long term solvency of Social Security. Session chair John Rother of the National Coalition on Health Care will provide a review of the program, its financing problem, and the leading proposals for eliminating the shortfall. Rother will then take you through an interactive exercise to come up with your own solutions for fixing Social Security.

Best Laid Plans: The Impact of Unforeseen Challenges on the Economic Security of Older Adults • Monday, November 21 • 8 to 9:30 a.m. • Hynes 202 (Convention Center) • Adverse health events, layoffs and changes in family structure (e.g., widowhood, divorce, marriage) can shake the firmest foundation for retirement. This symposium, sponsored by GSA’s Economics of Aging Interest Group, will consider whether and how older adults approaching retirement experience can plan for these risks, and then detail the impact of these shocks on well-being in retirement. This session will be chaired by Christine Bishop of Brandeis University.

Congressional Aging Issues Update • Monday, November 21 • 3:00 pm – 4:30 pm • Hynes 202 (Convention Center) • Capitol Hill staffers, including those from the Senate Special Committee on Aging, will discuss this year’s legislative developments and plans for aging and health policy for 2012. Topics will include the Older Americans Act reauthorization, income security, and health care reform implementation. GSA Policy Advisor Brian Lindberg will moderate this session.
Continued from page 1 - NIH Budget Proposal Spurs New Drive for Advocacy

to other agencies that could impact older Americans. For example, the U.S. Administration on Aging would receive $1.5 billion, which is $26 million (a two percent decrease) below last year’s level and $766 million below the president’s budget request. This funding includes $819 million, the same as the budget request, for nutrition programs. The bill does not provide any support for the Community Living Assistance Services and Support (CLASS) program.

The legislation also contains $3.2 billion for Centers for Medicare and Medicaid Services program management, which is $290 million (an eight percent decrease) below last year’s level and $1.2 billion below the president’s request. Furthermore, the Centers for Disease Control and Prevention would see $5.6 billion in funding, $52 million (a one percent decrease) below last year’s level and $220 million below the president’s budget request.

NICHE Revamps Online Resource Center
Nurses Improving Care for Healthsystem Elders (NICHE) has announced the implementation of a new navigation scheme for the nicheprogram.org website that features increased functionality for simpler, faster access to geriatric information, resources, and tools. A new Speakers Bureau section has also been added for NICHE community and media access to healthcare professionals with a wide range of specialties. The NICHE Knowledge Center is a content library featuring tools, implementation guides, nursing curriculum, and other resources designed to help improve the quality of care for older adult hospital patients. The Knowledge Center web framework now offers specific access avenues for patients/families, clinicians, interdisciplinary healthcare teams, and organizations. These entry points guide users to the most relevant content for their needs.

Updated Atrial Fibrillation App Available for Free Download
The AFib Educator 2.0 is a free smartphone app and computer widget designed to assist healthcare providers explain atrial fibrillation to their patients. This app provides visual demonstrations of the management techniques of the American Heart Association, American College of Cardiology, and Heart Rhythm Society atrial fibrillation clinical treatment guidelines. These visual animations can illustrate possible consequences of atrial fibrillation. For example, this app shows how a blood clot can form and flow to the brain and case an atrial fibrillation-related stroke, or potential disease-related changes to the heart. The AFib Educator 2.0 app and desktop widget are available for free download at www.AFStat.com. The app can also be downloaded from the Apple App Store Online Store.

National Center on Caregiving Releases Five Fact Sheets
The Family Caregiver Alliance’s National Center on Caregiving now has five new fact sheets available that detail critical issues in caregiving and long-term care. These new resources cover the following topics: caregiving statistics, caregiving with siblings, legal and other special concerns of LGBT caregivers, and mild cognitive impairment. Before this release, there were more than 60 fact sheets already available, which cover topics from financial implications of caregiving to policy implications. All of these fact sheets are available for free at www.caregiver.org.

Clinical Trial Diversity Conference Materials Archived Online
The Food and Drug Administration Office of Women’s Health and the Society for Women’s Health Research recently held a two-day conference to share a best practices approach to successful and innovative recruitment, retention, and analysis of women and minorities in clinical research. The conference included roundtable discussions and presentations on research design, cultural and linguistic competency, federal policies and regulations, and community collaborations. To learn more about the conference outcomes, and to view the webcast and speaker presentations, visit www.fda.gov/ScienceResearch/SpecialTopics/WomensHealthResearch/ucm273816.htm.

AARP Launches New LTSS Scorecard Website
The AARP State Long-Term Services and Supports (LTSS) has launched a new scorecard website that offers a multidimensional approach to measure state-level performance of LTSS systems that care for older people and adults with disabilities. The site studies state performance across four key areas of LTSS system performance. The website’s data are sourced from the recently published “Raising Expectations: A State Scorecard on Long-Term Services and Supports for Older Adults, People with Physical Disabilities, and Family Caregivers.” Individuals who use this new long-term service scoreboard can create their own customized, downloadable tables and bar charts. To access these tools, visit longtermscorecard.org/.
Oklahoma Partnership To Open Geriatric Clinic
The Oklahoma University School of Community Medicine and the Tulsa Jewish Retirement and Health Care Center have partnered together to open the new Oklahoma University Physicians Clinic. This facility allows board-certified geriatricians to be available and accessible to a larger community. The geriatric clinic provides services that address memory problems, walking and balance difficulties, joint and muscle pains, health promotion, while also helping with the management of chronic diseases and medications.

Report identifies positive outcomes and initiatives for older adult patients at NICHE designated hospitals
Nurses Improving Care for Healthsystem Elders (NICHE) has announced the launch of a Hospitals Report series, which will detail the positive outcomes and innovative initiatives experienced at NICHE-designated hospitals in their care of older adult patients. Over 300 hospitals in the U.S. and Canada have instituted the NICHE program for older adult patients to help make their health care journey a positive one. It provides online educational programs, methodologies, and tools developed by experts and experienced NICHE sites to help health care professionals improve their practice and achieve real improvement in the care of hospitalized older adults. The Geriatric Resource Nurse curriculum is one of the core components of the program and is designed for use by those at NICHE sites who train nurses in best practices for older adult patients. The first published report in the series provides a summary of outcomes and initiatives from all care categories and hospital settings. Fall reduction, reduced length of stay, decline in delirium, fewer skin problems, less restraint use are just a few of the reported successes. Future reports will focus more in depth on specific categories and settings. The summary Hospitals Report is available as a download on the NICHE web site at www.nicheprogram.org/join-features_benefits.

University of Missouri Students Offer Free Health Services
The MedZou Community Health Clinic was established by students at the University of Missouri to provide free health services to uninsured patients and to offer education programs for community members. This completely student-operated clinic also gives the students an opportunity to learn how to operate a health care facility. Patients are seen by licensed physicians, but support is provided by student volunteers from multiple disciplines. One of MedZou’s community outreach programs, Act On Knowledge, aims to educate underserved community members about risk factors for chronic diseases. MedZou is funded by a donation from the University of Missouri School of Medicine and grants from various organizations. It is open weekly on Thursday evenings and one other additional night throughout the month that focuses on specialty services.

University of Tennessee Offers New Global Disaster Nursing Program
The University of Tennessee, Knoxville, College of Nursing plans to train nurses to respond to emergencies with its new Global Disaster Nursing program. It will target the unmet need in public health by preparing nurses as leaders during mass casualty disasters. This training will involve teachings in the management of logistics during an ongoing event, how to effectively cooperate with government officials and first responders, and how to provide direct care to patients during a catastrophic event. This program is funded through a three-year grant from the Health Resources and Service Administration, part of the U.S. Department of Health and Human Services. The new content builds upon existing coursework, which trains nurses in global security threats, mass casualty and emergency communications, ethics, the ideology of terrorism, geopolitical affairs, management and leadership principles, and disaster-specific nursing care.

University-Linked Retirement Communities on the Rise
A recent article in the Middletown Journal describes the growing trend of links between older retirement communities and universities. Resident communities that have ties to major universities are seeing more older adults interested in continuing their affiliations with the local schools. Therefore, universities are offering more accommodations to older adults. Residents of the 13-acre senior housing community on the campus of Lasell College in Newton, MA, have access to art and dance studios, restaurant-style dining, and educational programs overseen by an academic dean. A 92-unit condominium complex for those aged 55 and older sits near the University of Michigan’s campus. The Knolls of Oxford is an 85-acre continuing care retirement community that has an ongoing partnership with Miami University in Oxford, OH. Residents have transportation to campus and are able to partake in Miami’s lifelong learning courses, which is self-funded. Many universities receive grants from Osher Lifelong Learning Institutes to provide this option for older adults in their community. Campus Continuum, which consults with developers and colleges while planning, marketing, and operating university-linked retirement communities, has found that many older adults like the idea of retiring to a home on a college campus.
Joint NIH Initiative Seeks To Support Systems Science Methodologies
Several agencies within the National Institutes of Health (NIH) have issued a funding opportunity that encourages R01 grant applications that propose to develop basic and applied projects utilizing systems science methodologies relevant to human behavioral and social sciences and health. This announcement is intended to encourage a broader scope of topics to be addressed with systems science methodologies, beyond those encouraged by existing open funding opportunity announcements. Research projects applicable are those that are either applied or basic in nature (including methodological development), have a human behavioral and/or social science focus, and feature systems science methodologies. The funding opportunity expires September 8, 2014. Visit grants.nih.gov/grants/guide/pa-files/PAR-11-314.html for complete information.

MSTAR Program Seeks 2012 Applications
The American Federation for Aging Research (AFAR) has partnered with the National Institute on Aging (NIA) and several foundations to continue the Medical Student Training in Aging Research (MSTAR) Program. This initiative provides short-term scholarships and is intended to encourage medical students, especially those focusing on research, to consider a career in academic geriatrics. Awardees receive experience in aging-related research and geriatrics under the mentorship of top experts in the field. Students participate in an eight-to-12 week structured research, clinical, and didactic program in geriatrics. Students may train (with the majority of students completing their training and research during the summer months) at an NIA-supported National Training Center, although a limited number of students are able to train at their own institution. Any allopathic or osteopathic medical student in good standing — who will have successfully completed one year of medical school at a U.S. institution by June 2012 and who is not receiving a stipend or salary support from a federal source — may apply to this program. All applications must be received by January 31, 2012. For additional details, see www.afar.org/research/funding/mstar.

Grant Supports Research on Lifespan Decision Making
The National Institutes of Health (NIH) has issued — as part of the NIH Basic Behavioral and Social Sciences Opportunity Network (OppNet) — a request for research grant applications that propose to increase understanding of the basic cognitive, affective, motivational, and social processes that underlie decision making across the lifespan. This includes an appreciation of the interactions among the psychological, neurobiological, and behavioral processes in decision making, and the mediating and/or moderating influences of genetics, physiology, the social environment, and culture. Applications are expected to propose projects that will further understanding of the basic behavioral and social mechanisms and processes involved in decision making, and contribute to unifying scientific inquiry across a wide range of biological, behavioral, and social science disciplines that examine judgment and decision making. Applications that clarify relationships among cognitive, affective, motivational, and social processes across levels of analysis and over the life course are encouraged. Approaches to these questions may include model animals, laboratory-based human research, and social science projects in real-world, ecological settings. Due to the complex nature of this research, OppNet encourages the formation of multidisciplinary research teams. All applications must be received by January 18, 2012. For additional details, see grants.nih.gov/grants/guide/rfa-files/RFA-MH-12-130.html.

Federal Monies Aim To Promote Community Living
The National Institute on Aging and the U.S. Administration on Aging invite grant applications using the R01 award mechanism for translational research that moves evidence-based research findings towards the development of new interventions, programs, policies, practices, and tools that can be used by community-based organizations to help older individuals remain healthy and independent in their own homes and communities. The goal of this funding opportunity is to support translational research involving collaborations between academic research centers and community-based organizations with expertise serving seniors that will enhance understanding of practical tools, techniques, programs, and policies that communities across the nation can use to more effectively respond to needs of their aging populations. This funding opportunity expires May 8, 2014. Visit grants.nih.gov/grants/guide/pa-files/PA-11-123.html for complete information.

The Section of Geriatrics
Yale University School of Medicine

The Section of Geriatrics, Yale University School of Medicine, is seeking a well-trained clinical investigator at the Assistant Professor level. This physician must have training in geriatrics and clinical investigation as well as evidence of excellent potential for an outstanding career in Geriatric clinical investigation. Yale University is an Affirmative Action/Equal Opportunity Employer. Qualified women and members of under-represented minority groups are encouraged to apply.

Send enquiries to:
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E-mail enquiries to: mary.tinetti@yale.edu

Please include CV and 3 references.

Please respond by December 15, 2011.
Bangkok Resort-Style Hospital Will Include Medical Center for Gerontology

The Bangkok Post recently released news that Bangkok’s City Hall is building a hospital that is designed to feel like a seaside resort. The hospital will have two main units. One unit will be for general treatment and the other unit will be a medical center for gerontology. It will be available for the more than 600,000 older people living in Bangkok and include the Geriatric Excellence Center and the Center for Improving the Quality of Life and Rehabilitation for Elderly People. This new facility will provide comprehensive services for older adults, such as therapy programs modeled from meditation, medical spas, and exercises and treatments for energy.

Older Australians’ Housing Seen as Priority Area

An Australian study has found that the current supply of age-specific housing available in Australia is not appropriate for their older residents. Older people that have entered age-specific housing did so due to declining health and a need for a safe and supportive environment. The report by the Australian Housing and Urban Research Institute indicates that policy-makers believe the current regulatory and policy frameworks are complex and not favorable for generating additional housing. Although regulations are needed to protect residents, inappropriate regulation may reduce innovation and discourage investment. The coordination and separation of housing and care are priorities for policy and decision makers in order to improve urban planning. The full report can be obtained at www.ahuri.edu.au/publications/projects/p70589.

Palestinian Life Expectancy Rises

According to WAFA, the Palestinian news and information agency, people aged 60 and older now represent 4.4 percent of the total population the Palestinian Territory. The figure was provided by the Palestinian Central Bureau of Statistics. Over the last two decades, Palestinian life expectancy increased for both males and females from 67.0 years in 1992 to 71.0 years for males and 73.9 years for females in mid-2011. In comparison, the percentage of people aged 60 and older in all developed countries reached about 16 percent of the population in 2010, while the percentage in all developing countries reached about six percent.

Study Finds British Unprepared for Retirement

According to The Guardian, a new survey by Prudential found that many working adults are no longer making contributions to their pensions in Britain. More than a third of adults have stopped paying into pensions, and approximately half of these individuals indicate that unemployment and/or not being able to afford the contribution as the reason for this investment change. A small percentage of those surveyed indicated that they were financially stable enough to retire, while more than a third believed that they would need to delay retirement due to financial constraints. Almost half of respondents said that they are considering other sources of income after they retire.

Older Irish Experiencing Income Rise

The Irish Times has reported that older people in Ireland have a decreased risk of falling into poverty than their counterparts did seven years ago. The risk of poverty for individuals 65 years of age or older fell from 27.1 percent in 2004 to 9.6 percent in 2009. The figures, released by Ireland’s Central Statistics Office, also reveal the gross weekly income of older Irish people rose by more than 48 percent during the same time period.

Canadians Adjusting to Older Workers’ Growing Numbers

According to the Financial Times, the two largest provinces in Canada, Quebec and Ontario, are experiencing a tremendous growth in the number of people working past the age of 64. Since the year 2000, the number of older adults working past the traditional retirement age has more than doubled. Although the entire life cycle is said to be changing in Canada, the effects from a large number of older people remaining in the work force can be both positive and negative. Canada is expecting a major demographic shift in the coming years, as the number of people working will shrink as the number of retirees grows.

Advancing the Aging Sciences

National Science Foundation funding will allow 28 new doctoral students to study aging over the next 5 years at Oregon State University. This Integrative Graduate Education and Research Traineeship (IGERT) is the first and only IGERT program in the nation with a focus on aging sciences. The program provides a $30,000 stipend and support for tuition and research. Students will be mentored by faculty in existing research cores at Oregon State’s Center for Healthy Aging Research:

1) diet and genetics
2) musculoskeletal
3) psychosocial and
4) gerontechnology.

Students from diverse disciplines, including psychology, sociology, public health, nutrition, exercise sciences, engineering, computer sciences, chemistry, biology, design and other disciplines may apply now for Fall 2012. Dr. Karen Hooker is the program’s Principal Investigator. For more information, visit: http://www.hhs.oregonstate.edu/igert/ or contact Anne.Hatley@oregonstate.edu.
Medicare Patients at Risk of Long-Term Institutionalization After Hospital Stay

A national study has shown that being hospitalized for an acute event, such as a stroke or hip fracture, can lead to long-term institutionalization in a nursing home. Researchers also found that direct discharge to a skilled nursing facility — a common practice designed to reduce hospital stays — put patients at “extremely high risk” of needing long-term nursing home care.

According to a team at the University of Texas Medical Branch (UTMB) in Galveston, these findings suggest that programs aimed at helping older patients recuperate successfully at home instead of in an institutional setting could greatly improve their health outcomes and reduce healthcare costs. The study is published online in the *Journals of Gerontology Series A: Biological Sciences and Medical Sciences*.

“Hospitalization is a tipping point for older patients, often reducing their ability to live as independently as before,” said lead author James S. Goodwin, MD, the director of the Sealy Center on Aging at UTMB and the George & Cynthia Mitchell Distinguished Chair in Geriatric Medicine.

Goodwin also noted that certain factors common among the elderly — cognition problems, frailty, lack of social support — increase the risk of nursing home institutionalization.

“Add the enormous systemic pressure to reduce hospital stays and a dearth of viable programs to help patients fully recover their health and independence after hospitalization, and there simply isn’t a clear path to get the patient back home,” he said.

Medicare pays 100 percent for 20 days at a skilled nursing facility for patients who have just been released from the hospital but still need extra care.

“There is a very narrowly defined view of what Medicare will provide post-hospital,” said Goodwin. “If Medicare payment guidelines were broadened to cover in-home care — bathing and food preparation for example — there is a tremendous potential for savings and patients could adjust gradually back to their familiar home environment. Medicare will not pay for the in-home care.”

Goodwin and his colleagues measured a five percent sample of Medicare enrollees (approximately 762,000) aged 66 or older between 1996 and 2008 who were admitted to nursing homes. Of that population, 75 percent were admitted to a nursing home for long-term care within six months of a hospital stay.

According to Goodwin, the period studied paralleled a time of growth in the use of skilled nursing facilities, which may have been due to Medicare’s adoption of a prospective payment system that encouraged hospitals to reduce the length of stays.

Institutionalization after hospitalization increased with older age, in women and in patients without a primary care physician. The odds of institutionalization were also more than six-fold higher in patients with a dementia diagnosis and increased in patients with other co-morbidities, including delirium and incontinence.

Being transferred to a skilled nursing facility on discharge was the primary risk factor leading to substantial long-term care. The percent of hospitalized Medicare patients transferred on discharge increased from 10.8 percent in 1996 to 16.5 percent in 2008. Additionally, the study found that nearly 65 percent of patients in a nursing home six month after hospitalization had first been transferred to a skilled nursing facility. This was up from 50 percent in 1996.

Researchers also found several factors that reduced the risk of long-term institutionalization. Patients cared for in larger hospitals and major teaching hospitals were less likely to be in a nursing home six months after discharge, as were patients treated by their primary care physicians. In general, rates of nursing home institutionalization were lower in Midwest and Western states, where regulations, cultural and social factors may reduce nursing home use.

Goodwin recommended that hospitals consider alternatives to skilled nursing facilities post-hospitalization, such as community-based facilities, assisted living facilities and at-home care. Developing preventive programs that target the population at-risk for long-term nursing home care — hospitalized Medicare patients — may serve as another avenue to avert long-term institutionalization. He also suggests exploring ways to reduce the economic incentives of keeping patients in long-term care and divert savings to such alternatives and prevention programs.

“There is no perfect solution for caring for patients who may not be able to function completely independently and who lack a social network of able caregivers,” said Goodwin. “We do know that most people fervently wish to remain at home and it is our responsibility to help avoid preventable nursing home admissions.”

Yong-Fang Kuo, PhD, an associate professor in the Department of Internal Medicine, Division of Geriatric Medicine at UTMB, co-authored this study, which was funded by the National Institutes of Health.

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**Gerontology News** accepts ads for conferences and special events, fellowships, jobs, and degree programs relevant to the field of aging.

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Yale University offers a two- to three-year postdoctoral training program in Geriatric Clinical Epidemiology and Aging-Related Research, sponsored by the National Institute on Aging. The goal of the program is to provide highly qualified fellows (MDs or PhDs) with research skills in geriatric clinical epidemiology and an intensive research experience under the mentorship of experienced investigators in gerontology and geriatric medicine. Trainees will have access to resources and expertise through the Program on Aging/Claude D. Pepper Older Americans Independence Center, the Robert Wood Johnson Clinical Scholars Program, the Investigative Medicine Program, the School of Public Health, and the Geriatric Medicine Program.

Candidates who have a PhD should have completed their doctoral training in areas such as (but not limited to) gerontology, public health, epidemiology, biostatistics, psychology, or biology, and should be committed to an academic career in aging-related research. Minority candidates are encouraged to apply. US citizenship or permanent residence is required.

Bowling Green State University (BGSU) is seeking applicants for a tenure-track Assistant Professor position in its Gerontology Program beginning August 2012.

This position will be in support of a new interdisciplinary Masters degree in Gerontology. The areas of interest and specialization within gerontology are open, but preference will be given to candidates with expertise in health and aging, long-term care, social policy and administration, and/or methodology.

Position responsibilities include teaching at the undergraduate and graduate level; an active program of research in aging; advising; and program, departmental, college, and university service.

Candidates are required to hold a doctorate in gerontology or closely related field. If the degree is in a related field, specialized education and training in gerontology is essential. ABD candidates will be considered, although degree completion is expected prior to employment.

Review of applications will begin November 15 and continue until the position is filled.

A letter of interest, vitae, and three current letters of reference (on letterhead) should be sent electronically to norel@bgsu.edu, or in hard copy to: Gerontology Search Committee, Department of Human Services, 223 Health Center, Bowling Green State University, Bowling Green, OH 43403-0284. Inquiries can be directed to Dr. Nancy Orel by mail, phone (419-372-7768) or e-mail (norel@bgsu.edu).

Application materials can be obtained from Robbin at 203-688-9423 or at http://medicine.yale.edu/intmed/geriatrics/training/index.aspx

Information about the Yale Program on Aging may be found at http://medicine.yale.edu/intmed/geriatrics/research/index.aspx

The deadline for applications for the 2012 academic year is January 27, 2012.

—ASSISTANT PROFESSOR • GERONTOLOGY—

USC Edward R. Roybal Institute on Aging

Call for Nominations

Pearmain Prize for Excellence in Research on Aging

The Pearmain Prize for Excellence in Research on Aging gives special recognition to an outstanding senior scholar who has made outstanding contributions to the field of translational aging research.

The University of Southern California (USC) School of Social Work established the Pearmain Prize for Excellence in Research on Aging on behalf of the USC Edward R. Roybal Institute on Aging. The Institute fosters and recognizes excellence in research that furthers the needs of minority older persons, particularly those from underserved backgrounds.

Nominations are due by December 5, 2011.

http://roybal.usc.edu
population will almost double to 70 million by 2030, while by mid-century, the number of ethnic elders will grow to four out of 10 Americans age 65 and up.

“These journalism fellowships will bring critical stories about what it means to age in America to millions, who are getting too little information about an issue that affects all of us. Families need to know that aging affects every generation in every corner of our society, regardless of language or culture,” said Sandy Close, founder and executive editor of NAM.

In Boston, the fellows also will and participate in a day-long workshop, where GSA member experts will discuss the latest research and provide insight on key issues facing older Americans. Travel grants also are being provided to allow last year’s fellows to participate in the meeting.

Azadeh Ansari (assignment editor/writer, CNN International, Atlanta, GA) will produce a video documentary story with written website postings on the struggles of elderly Iraqi Arab and Christian refugees in America, mainly in Dearborn, MI. She was on the CNN team that earned a 2011 Peabody Award for covering the BP oil spill.

Hanah Cho (reporter/blogger, Baltimore Sun, Baltimore, MD) will author “Drowning in Debt,” a two-part series on the major financial crisis facing older Americans.

Karla Gómez Escamilla (reporter/anchor, Univision Arizona, Tucson, AZ) will produce a series of reports on immigration challenges for Latino seniors.

Kerry Hannon (author/columnist/broadcaster, Forbes and AARP, Washington, DC) will produce a series of three articles on work and retirement of the boomer generation.

Kay Harvey (independent journalist, MinnPost, Woodbury, MN), a former reporter on aging for the St. Paul Pioneer Press, will write a four-part series on the economic insecurity and health challenges of aging Minnesotans.

Jongwon Lee (editor, Korea Daily Atlanta, Atlanta, GA) will publish a three-part series on the strain of American traditional ways felt by elders in extended families, especially with family crowding in the current housing crisis.

Pamela MacLean (senior writer, RedwoodAge.com, Larkspur, CA) will produce three multimedia articles on mental health issues awaiting aging boomers and their Generation X children. The veteran legal issues reporter will focus on such developments as diagnostic changes that may affect insurance coverage; uncertain availability of mental health facilities; and legal and law-enforcement concerns, such as protecting mentally incapacitated elders from fraud.

Nadia Maiwandi (community and events editor, India Currents Magazine, San Jose, CA) will explore the plight of older immigrant women from India who find themselves dependent on their families and the women who care for them, often while juggling multiple responsibilities both in and outside of their homes.

Araceli Martinez Ortega (Sacramento correspondent, La Opinión, Los Angeles, CA) will develop a series on the struggles of Latino elders living solely on Social Security, especially those who are parents of incarcerated children.

Andrea Parrott (freelance writer, Twin Cities Daily Planet, Minneapolis, MN) will author a three-part series on Alzheimer’s disease, with an emphasis on African American families.

James Ridgeway (senior Washington correspondent, Mother Jones, Washington, DC), a documentary producer, author/co-author of 16 books, and former political editor of the Village Voice, will concentrate on the rising tide of aging prisoners.

Rebecca Rivas (staff reporter/video producer, St. Louis American, St. Louis, MO) will develop a three-part series on how social media and the Internet affect learning, isolation, and older-worker issues for older African Americans, such as a new breed of entrepreneurial grandmothers using online media to generate income for their families.

Johanes Rosello (reporter, Mundo Hispanico, Norcross, GA) will produce a series on language and cultural barriers facing growing population of Latino elders in Georgia, where the Hispanic population has doubled in the last decade.

Paula Spencer Scott (senior editor, Caring.com, Kensington, CA) will produce a five-part series on caregiver syndrome, including what caregivers can do to reduce their heightened risks to their physical and mental well-being, work, and relationships.

Rochelle Sharpe (freelance reporter, New England Center for Investigative Reporting, Boston, MA) will investigate declining life expectancy for women in some low-income U.S. regions. Sharpe, who shared a 1991 Pulitzer Prize for National Reporting, is a former Wall Street Journal reporter and has written for the Boston Globe, Business Week, and many other publications.

Three postdoctoral positions are available for the “Translational Research in Aging Training Program” at Harvard Medical School and affiliated institutions, starting between June and September, 2012. Applicants must be U.S. citizens or permanent residents. Two years of support are provided through an NIA-funded National Research Service Award for salary, mentored research activities, coursework, and seminars. Trainees may also apply for loan forgiveness. Areas of research span basic science, clinical, and health care topics in aging and include:

- Biology of aging
- Cerebrovascular pathophysiology, imaging and modeling
- Delirium and dementia
- Depression and mental health
- Epidemiology, genetics and nutritional aspects of bone and muscle
- Gait, balance, and foot biomechanics
- Health disparities
- Mechanisms and risk factors for falls
- Mitochondrial mutations
- Palliative Care / Health Policy
- Skeletal imaging
- Vascular aging and blood pressure regulation

Candidates should submit electronically a CV and letter of intent indicating their interest in one or more of the above areas by December 19, 2011 to: Lois Hartsough, lhartsou@bidmc.harvard.edu

Qualified applicants will be matched with potential mentors for preparation of a full proposal which will be due January 31, 2012.

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**Division of Gerontology, Department of Epidemiology & Public Health**

**TWO NEW POSITIONS**

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

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

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

Applications of a cover letter, CV, and 3 references should be submitted to: vyu@epi.umaryland.edu

Confidential correspondence related to this position should be directed to Jack Guralnik, chair of the search committee at 410-706-2406 (guralnik@epi.umaryland.edu) or Jay Magaziner, chair of Department of Epidemiology and Public Health at 410-706-3553 (magaziner@epi.umaryland.edu).

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

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Blissful Boston Awaits You

GSAs 64th Annual Scientific Meeting is nearly upon us! As you are likely aware, the meeting is being held in Boston at the John B. Hynes Veteran Memorial Convention Center from November 18 to 22. Check out the information below to get out of the routine of previous conferences and embrace the bliss Boston has in store for you!

Meeting Planner

The meeting planner is great place to start your journey for the conference! Go to www.geron.org/annualmeeting and click on the “Meeting Planner” box to begin searching through GSA’s program. The planner guides you through the process of organizing agendas so you can stay engaged during the conference through sessions, presentations, social networking, and more! This conference experience, whether or not it is your first, is what you make of it.

ESPO-Sponsored Events

ESPO has numerous events that you may attend. These events are a great way to network with those who may be like you: in school, teaching, conducting research, running a business, or looking for a new job. If you have more questions about ESPO, stop by the new Meet the Expert space at the GSA booth in the Exhibit Hall. More information on the time ESPO members will be available can be found at www.geron.org/meettheexpert. And take note of the following ESPO events that were developed by and for students and new professionals!

Saturday, November 19

New Member Meet and Greet: 7 to 8 a.m.

ESPO Breakfast and Community Meeting: 8 to 10 a.m.

Mentoring Consultancies for Emerging Scholars: 3:30 to 5 p.m.

(In partnership with the Mentoring Task Force, the Behavioral and Social Sciences Section, the Social Research, Policy, and Practice Section, and the Publications Committee)

ESPO Awards Ceremony and Reception: 7 to 8:30 p.m.

Sunday, November 20

ESPO Behavioral and Social Sciences symposium, “Prevalence of Lifestyle Behaviors in Older Adults with Cancer”: 1 to 2:30 p.m.

Professional Development Symposium, “Life after Graduate School: Navigating the Process”: 3 to 4:30 p.m. (Co-sponsored by the GSA Task Force on Mentoring and the Association for Gerontology in Higher Education)

ESPO Biological Sciences Symposium, “Neuromuscular Function and Anabolic Signaling Are Impaired with Aging and a High-Fat Diet”: 3 to 4:30 p.m.

ESPO Social Research, Policy, and Practice Symposium, “Trust, Caring, Advice, and Contact: Relational Attributes of Persons Named to Advance Care Planning Roles Among Women with Recurrent Cancer”: 5 to 6:30 p.m.

Monday, November 21

ESPO Health Sciences Symposium, “Health, Aging, and Diversity Research: Hypertension, Diabetes, Exercise, and Health Perception”: 8 to 9:30 a.m.

ESPO Presidential Symposium, “The Impact of Environmental Change on the Lifestyle and Lifespan of Older Adults: An Interdisciplinary Perspective”: 1 to 2:30 p.m.

ESPO Lounge

While in Boston, the ESPO lounge provides a place for members to rest from the intense conference pace, meet with colleagues, and learn more about ESPO. Please stop by! The lounge is scheduled to be open from Saturday, November 19, to Monday, November 21 from 8 a.m. to 5 p.m. Be sure to check the Program Book to find the room location.

Hotel and Transportation

If you have not bought your ticket to Boston, keep in mind that American Airlines is offering a 10 percent discount to all attendees. If you are closer and do not want to make the drive, Amtrak is providing GSA attendees a 20 percent. The Sheraton Boston Hotel and Westin Copley Place serve as the co-headquarters hotels for the conference. A shuttle service can carry you to either hotel for a $14 per person one-way cost from Logan International Airport. Other options include taxi and subway service. More information is available in the Meeting Venues and Travel section at www.geron.org/annualmeeting.

Twitter/Facebook

ESPO is plugged into social networking through Facebook and Twitter. Log into either site before and during the meeting to obtain up-to-date meeting information. Visit www.facebook.com (search for “GSA Emerging Scholars and Professional Organization”) or www.twitter.com/GSA_ESPO. The ESPO Facebook page is particularly useful for those looking to find potential hotel roommates for the meeting.
Networking

The GSA meeting is a great place to network with other scholars and professionals. ESPO Chair-Elect Chivon Mingo wrote a great article in our August newsletter about the etiquette of conferences. In it, she writes that networking can occur anywhere at the conference, so be ready! Identify people you would like to meet before you go and have your advisor or other GSA mentor introduce you. Carry business cards and copies of your CV to share your contact information with the people you meet. Also, you are encouraged to have handouts of your paper or poster so that attendees can leave with your contact information and study findings. Attend different ESPO sponsored events to network with other ESPO members!

Paper/Poster Presentations

Instructions for each type of presentation are available if you are presenting at the meeting. Prior to presenting, verify the time and room location of your presentation. Knowing where you will be may make for a more comfortable atmosphere when you do present. Take time to practice your presentation so you know how much time it takes. Remember to bring a computer, as they are not provided at the meeting. For posters, check that the size of your poster is appropriate for the space provided and bring extra tacks should you need them to hang your poster. GSA recently hosted a webinar on poster presentations; it is archived at www.geron.org/webinar.

Things to Bring

It may be helpful to pack a notebook, business cards, snacks, a sweater/jacket, and comfortable shoes.

Fall in Love with Boston

Boston — home to cultural arts, distinguished dining, world-class shopping, and championship sports teams — is a unique place for travelers. Visit the Boston Insider website (www.bostonusa.com/visit/bostoninsider) for information about everything Boston has to offer. Also, GSA has organized a couple of tours for individuals interested in exploring Boston with other attendees. For more information, visit the Meeting Program section at www.geron.org/annualmeeting.