

December 2023

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GSA Funds Welcome Donations

GSA recognizes that during the holiday season, many people make year-end donations to worthy causes. Such options include the GSA Innovation Fund used to develop new programs, products, and services for members, and the funds associated with the Founder's Day Emerging Scholars Campaign. [All contributions are tax deductible.](#)

GSA Calls for Careers in Aging Month Proposals

GSA has designated March 2024 as Careers in Aging Month, and its Academy for Gerontology in Higher Education (AGHE) is accepting applications for awards of up to \$500 to support GSA members' event(s) focusing on careers in aging. The deadline to submit is January 5. GSA has also prepared a [planning document](#) detailing the information you will need for your submission.

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Annual Scientific Meeting Attendance Booms in Sunny Tampa



▲ President James Nelson (L) welcomed conference-goers to his Opening Plenary Session for a keynote address by journalist and author Frank Bruni (R). The address concluded with a Q&A session between Nelson and Bruni. GSA

also honored the 2023 recipients of GSA's highest awards with video tributes, now available for viewing on YouTube: [Kathleen Wilber](#) for the Donald P. Kent Award, [David M. Almeida](#) for the Robert W. Kleemeier Award, and [Jacqueline L. Angel](#) for the James Jackson Outstanding Mentorship Award.

Approximately 4,000 people from 42 countries made their way to Tampa, Florida, from November 8 to 12 for GSA's 2023 Annual Scientific Meeting. The photos and facts below capture highlights from the five-day event.



▲ The program included more than 3,500 presentations in over 560 sessions that consisted of 1,247 individual symposium presentations, 660 papers, 1,662 posters, and 14 award lectures. GSA also broke a record this year in the number of late breaking abstracts received, 888.



Continued on page 6



A Return to Vaccine Reverence Is Key to Disease Prevention

By James Appleby, BSPHarm, MPH • jappleby@geron.org

As we prepare to enter the fourth year of the United Nations' [Decade of Healthy Aging](#), we've witnessed some major progress on both the treatment and prevention of disease. In 2023, we witnessed the first full approval from the U.S. Food and Drug Administration (FDA) of a disease-modifying treatment for Alzheimer's Disease. And we saw the first FDA-approved treatment for agitation associated with dementia.

On the prevention front, this year included FDA approval of two vaccines to protect individuals — particularly those who are pregnant, infants, and older adults — against respiratory syncytial virus (RSV). This is the first influenza season where vaccines are available for three major respiratory viruses: COVID-19, RSV, and influenza. Hopefully we'll see a COVID-influenza combination vaccine emerge within the next year. And with high-dose influenza vaccine available for older adults, everyone has the opportunity to obtain their age-appropriate vaccines and be well-protected against severe disease.

But having the vaccines available isn't enough to ensure the well-being of the U.S. population across the life course. We must regain the reverence we once had for vaccines when these life-saving interventions for polio, measles, smallpox, and influenza were first invented. That's where GSA's **Concentric Value of Vaccination as We Age** initiative comes in. Falling under the umbrella of the Society's long-running National Adult Vaccination program, this new initiative has convened a diverse group of stakeholders to rebuild our collective reverence for vaccines.

Why do we use the term "concentric?" Imagine a series of five concentric circles. In the center is the individual who wants to protect themselves from an illness by vaccination. The vaccine prevents this disease or reduces the morbidity associated with it in this one individual. But the value of

the vaccination extends well beyond this one person. The first concentric circle around the individual represents other health conditions that may be ameliorated thanks to the initial vaccine. The second concentric circle denotes the benefit of preventing disease from being spread to family members. The next concentric circle represents the value of preventing disease from being transmitted to co-workers and the public in the workplace. The fourth circle reminds us of the reduced health care costs resulting from avoided disease and increased productivity (less time away from work or school; higher quality of care for older adults in congregate settings). The final concentric circle illustrates the value of the vaccine to society at large by providing herd immunity and contributing to healthcare equity.

Vaccines provide health, economic, and social benefits to individuals and society across the life course, with major implications in adults 50 years old and over. The **Concentric Value of Vaccination as We Age** initiative will inform publications, presentations, and programming aimed at increasing understanding among the public, professionals, policymakers, and others that the impact of vaccines is broad, far-reaching, and well beyond the reduction of morbidity and mortality from individual infections.

Those who joined us for the recent Annual Scientific Meeting in Tampa likely noticed that we had a vaccine clinic on our exhibit hall floor, where attendees could easily obtain vaccines against COVID-19 and the current flu strains.

We should also pause to recognize the work that went into these newly developed vaccines. I applaud the researchers, clinical trial participants, and corporations who achieved these successes under adverse conditions amidst a global pandemic.

This holiday season, I hope you'll join us in making a new year's resolution that 2024 be marked by a *return to reverence* for the empowering gift of vaccines. Stay safe!

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member news

Members in the News

- On October 2, Caroline Cicero, PhD, was quoted in a *Los Angeles Times* column titled “[In Sen. Feinstein’s death, lessons for all of us about when to leave work behind.](#)”
- Donna Benton, PhD, was quoted in an October 15 *Miami Herald* story titled “[New Medicare proposal would cover training for family caregivers.](#)”
- An October 27 NBC News story titled “[Black people are beating the odds by turning 100 — and they’re celebrating on TikTok](#)” featured quotes from Antonius Skipper, PhD, Tamara Baker, PhD, FGSA, and Alyssa Ann Gamaldo-Roddy, PhD, FGSA.

Member Spotlight

GSA’s website features monthly Q&A sessions with distinguished members.

The current spotlight shines on:
[Ben Schumacher, PhD.](#)

Member Referral Program

This month’s \$25 Amazon gift certificate winner:

Tamar Wyte-Lake DPT, MPH.

The recipient, who became eligible after referring new member **Matthew Van**, was randomly selected using randomizer.org. For more details on the Member Referral Program visit: www.geron.org/referral.

Members Chosen for China Conference Delegation

Following a call for abstracts, GSA selected several members to serve as the Society’s delegates to the Chinese Congress on Gerontology and Health Industry 2023, which was hosted by the China Association of Gerontology and Geriatrics, China Health Promotion Foundation, and other institutions in Haikou, China, from November 17 to 19.

Led by GSA President James Nelson, PhD, FGSA, the delegation consisted of Allyson K. Palmer, MD, PhD, of the Mayo Clinic; Elham Mahmoudi, PhD, of the University of Michigan; Hanzhang Xu, PhD, RN, of the Duke University School of Nursing; and Robert Weech-Maldonado, PhD, FGSA, of the University of Alabama at Birmingham.

THANK YOU

To the following GSA members who have participated in our Member Referral Program to date in 2023.
Your support is truly appreciated!

Andrew Achenbsum
Ali Ahmed
Sato Ashida
Jenna Bartley
Thomas Bayer
Richard Beaulaurier
Susan B. Bluck
Angelo Bos
Barbara Bowers
David Burnes
Qiuchang (Katy) Cao
Brian D. Carpenter
Dawn Carr
Giuliana Casanova
Jodi Catlow
Jen-Hao Chen
Tuo-Yu Chen
Nai Ching Chi
Runcie Chidebe
Maria Claver
Yenisel Cruz-Almeida
Mahederemariam Dagne
Kara Dassel
Adam Davey
Debra Dobbs
Amy Dore

Maritza Dowling
Ashley Ermer
Sara Espinoza
Heidi Ewen
Noelle Fields
Terry Fulmer
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Anne H. Gauthier
Tom M. Gill
Laura Girling
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Blacklee Kemp
Kyungmin Kim
Keith Kleszynski
George Kuchel
Margie E. Lachman
Kathy Lee
Terri D. Lewinson
Yin Liu
Neha Lodha
Diane Martin
Kellie Mayfield
Christina McCrae
Ellen McCreedy
Lisa McGuire
Tara McMullin
Kelly Melekis
Natascha Merten
Kylie N. Meyer
Christina Miyawaki
Keith Morgen
Gabrielle Moriello
Emily L. Mroz
Shevaun D. Neupert

Kathy Packard
Tam Perry
Elyse Perweiler
Natasha Peterson
Karl Pillemer
Natalie D. Pope
Jenny Portz
Michael Province
Nekehia T. Quashie
Jennifer Reckrey
Karen Roberto
Maria Roche-Dean
Wendy A. Rogers
Erlene Rosowsky
Laura P. Sands
Sydney Schaefer
Frederick Schmitt
Stacey B. Scott
Suzanne Segerstrom
Michael Silverman
Mo-Kyung Sin
Marty Sliwinski
Avron Spiro
Bernard Steinman
Elsa Strotmeyer
Diana Sturdevant

Suzanne Sullivan
Maryam Tabrizi
Ladda Thiamwong
Olena S. Tomarevska
Kathleen Unroe
Elizabeth Vasquez
Rae Walker
Jonathan Wanagat
Tiffany Washington
Juliet Davis Weave
Beverly Gwen Windham
Bei Wu
Mary F. Wyman
Hariom Yadav
Chen Yingying
Faika Zanjani
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Hickman Discusses State-Level Advocacy in End-of-Life and Palliative Care

Networking was alive and well at GSA's Annual Scientific Meeting in Tampa, and some of us enjoy that aspect as much as the amazing scientific sessions. After a Policy Series session, I was fortunate to run into one of GSA's policy advocates, Susan E. Hickman, PhD, FGSA, who is a professor and director of the Indiana University Center for Aging Research at the Regenrief



Hickman

Institute, and Cornelius and Yvonne Pettinga Chair in Aging Research at Indiana University Schools of Nursing & Medicine. So, like many of you, Susan is quite busy in her academic world, but has carved out time to participate in educating and advocating before her state legislature and executive branch. Here we discuss a wonderful case study in state advocacy.

Brian Lindberg: It was great seeing you in Tampa at the Annual Scientific Meeting. Your victories in education and advocacy at the state level are quite impressive. Let's start with your motivation: what got you interested and then driven to work in the field of end-of-life and palliative care?

Susan Hickman: Thanks, Brian — it was a great conference, and I was honored to be inducted as a GSA fellow in the Social Research, Policy, and Practice Section! I have always been drawn to geriatrics, but first became interested in palliative and end-of-life care during my postdoctoral fellowship in geropsychology, where I worked closely with former GSA President Terri Harvath in the Portland VA Extended Care Facility. I had the privilege of engaging in therapy with several veterans with serious illness, including one gentleman with metastatic cancer.

Despite my best efforts as someone on the "inside" who was in a position to help smooth the process, he experienced several stressful events in the final months of his life that were clearly attributable to systems issues including information loss, poor clinician communication, goal discordant care, and medication-induced delirium. This experience motivated me to take a role at Oregon Health & Science University on a grant funded by The Robert Wood Johnson Foundation focused on improving care of the dying through systems change. Our work highlighting POLST [a portable medical order] as a clinical innovation piqued my curiosity about whether it was working as intended in practice, and this became a focus of my research and academic career.

Brian: Please set the stage for us: what was happening in Indiana that led you to see the need to change laws governing end-of-life care?

Susan: I am a founding member of the National POLST Coalition and some of my early work in Oregon included a collaboration with the American Bar Association Commission on Law and Aging focused on state legislative barriers to implementing a model called POLST. Six months after we published our article, I relocated to Indiana — one of the states we identified as having significant legal barriers to POLST. When I arrived, I discovered an engaged, enthusiastic community who was eager to develop a POLST program in Indiana, but uncertain where to start, so we pulled folks together for a meeting to explore if legislative change was feasible.

Brian: Please tell me how you got to know the legislative process well enough to use it for your cause. And is it different from what you have seen at the federal level?

Susan: Thanks to the advocacy work of physician colleagues, the Indiana State Medical Association and Indiana Academy of Family Physicians made the development of the Indiana Physician Orders for Scope of Treatment (POST) a priority. This gave us well connected, knowledgeable advocates at the table early on who helped us identify a legislative sponsor and pull in other key partners. We also had a strong contingency of elder law and probate attorneys who connected us with the Indiana Bar Association. These individuals taught me a great deal about how the system works and how to navigate the Indiana General Assembly. I have only a little experience with federal advocacy, and I think the biggest difference between the state and federal levels is the accessibility of law makers — it is not always easy, but there are fewer layers than at the federal level which makes it easier to build relationships.

Brian: I like to refer to what GSA members do as *education* and advocacy in part because we use research, data, and facts to support our policy positions. Did you find that your stature at a research institute was helpful in the pursuit of your goals?

Susan: Absolutely. We have passed four state laws related to health care decision-making with just one opposing vote over the past decade, and that is in large part because we invested significant time educating legislators and other key parties. In the beginning, that meant countless meetings where we talked with legislative affairs representatives, attorneys, health care providers, and other community members about the need, research, data, and experiences of other states. This included conversations about how health care actually works.

My favorite story is when one of the attorneys present insisted that it had to be the patient's responsibility to make sure their completed

POST form accompanied them to the hospital. I had to explain that a person living with dementia in a nursing home who is being transferred to the hospital because of a fall is unlikely to remember to bring their glasses or teeth, let alone a portable medical order form! They just did not know — they had no experience with the population and did not appreciate why this requirement was problematic for our intended population of adults with serious, life-limiting illnesses. When we introduce our bills and I testify, I always provide a handout to legislators addressing frequently asked questions along with a list of supporting organizations. I then use my testimony to explain the proposed legislation, rationale, and evidence. I am confident that being a faculty member at Indiana University helped establish my credibility.

Brian: Would you share what you learned about working with local and state coalitions and identifying and working with key players? Tell me about the [Indiana Patient Preferences Coalition \(IPPC\)](#) – its creation, its members, its governing structure, etc.

Susan: We started in 2010 with a “snowball membership” approach in which we asked existing members who else should be at the table and then reached out to invite those individuals to join. We said “yes” to virtually everyone who wanted to join and at one point, we had 74 members! This strategy was surprisingly effective because it pushed us outside our own circles and broadened the coalition to include diverse perspectives and knowledge. Initially, I co-led the group with an amazing palliative care physician, Dr. Jerry Walthall, who was incredibly supportive and open to strategically using his gravitas as a senior clinician to move our work forward.

We strive to achieve consensus and that means that we have made several compromises along the way. We continue to meet at least quarterly to monitor issues related to existing legislation, identify educational needs, and support advance care planning work happening around the state. We are also members of the [National POLST Coalition](#), which gives us access to resources and a network of colleagues.

Brian: These successes did not happen overnight; how did you keep the needed intensity and commitment over time?

Susan: I have heard directly from dedicated, compassionate professionals in the trenches how our laws both support and impede their work, which has been highly motivating. I feel a strong sense of responsibility to ensure things are working well that has kept me engaged and active in this work, including our more recent successes in completely overhauling our advance directive statutes. Luckily, I am at an institution that values community engagement and supports service work, so I have been able to continue my involvement.

Brian: What key lessons would you like to share for people interested in policy advocacy and education?

Susan: A key lesson I have learned is the value of identifying allies in your state and working together to build consensus. In that process, it is important to think broadly about who might have an opinion on the matter and proactively work to include them in the conversation. If you can achieve this kind of united grassroots support, it is incredibly powerful to support legislative and even cultural change. Additionally, do not give up! One of the best emails I ever received was from a governmental affairs attorney who was involved in our early work and was leaving her role. She wrote that when she first started attending our meetings, she thought I was “crazy.” This made me laugh and also validated my feeling early on that I was banging my head against a brick wall. She said that as she looked back on her career with that organization, she believed the work we did as a coalition was the most impactful, meaningful work she had been involved in. I am so grateful to her and all my colleagues in Indiana for working together to make this change a reality.

For anyone interested in doing policy work in this space or related to other aging issues, additional generalizable tips include the value of personal connections with legislators as well as governmental affairs experts. Investing in these relationships builds credibility and paves the way for future work. It is also important when possible to avoid partisanship. When issues are potentially sensitive, identify allies who can help with proactive outreach to groups who may raise concerns and do this early on in the process. Finally, look for alignment with your interests and the expertise of legislators. The original sponsor of our Indiana POST Act was an emergency medicine physician, who understood in a very real way why our work was important and was a great advocate.

Recent GSA Policy Actions

GSA supports the [Medical Nutrition Therapy \(MNT\) Act Reintroduction](#) (S.3297), which was reintroduced in November in both the House and Senate. It is designed to enhance Medicare coverage for medical nutrition therapy to help Americans confront a broader array of conditions. It will also empower more health professionals to make referrals for MNT, reaching more patients at higher risk or experiencing health disparities.

GSA Welcomes Internship Applications

GSA is home to an established summer policy internship program. Aimed at emerging scholars, this professional development opportunity is named in memory of [Kathryn Hyer, MPP, PhD, FGSA, FAGHE](#), and [Greg O’Neill, PhD](#), who were policy scholars and long-time GSA members. GSA is seeking three internship candidates to participate in an eight-week in-person experience in Washington, DC. Over the summer, interns will be immersed in aging-related policy development and participate in this process at the national level. [2024 application submissions are due January 31.](#)

► GSA's Board of Directors convened in-person: (From L to R): Carmen Castaneda-Sceppa, Marilyn Gugliucci (elect), Judith Howe, Peter Lichtenberg, Marie Boltz, James Nelson, Laura Haynes, Monique Brown, Patricia Heyn, Dave Zook.

▼ The therapy dogs (and the people) of Project PUP, a Tampa-area therapy dog group, interacted with attendees in the Exhibit Hall before participating in GSA's Human-Animal Interaction Interest Group meeting.



▲ Past GSA Presidents gathered for a reception. Back row (L to R): Theresa Harvath, James Nelson, Nancy Morrow-Howell, Lisa Gwyther, Nancy Whitelaw. Front row (L to R): David Ekerdt, Barbara Resnick, Terry Fulmer, Toni Antonucci, Harvey Jay Cohen.

▲ At its booth in the Exhibit Hall, GSA gave demonstrations of Ageism First Aid, an online, self-paced, multi-module course designed to help change the common misconceptions and negative myths about aging by replacing them with facts that should be common knowledge. The course, designed for undergraduate students and health professions students, is available on the new GSA Enrich learning management platform.



◀ During the GSA Business Meeting, outgoing president James Nelson (L) handed over the reins to Vice President Judith Howe (R), who will take office as president on January 1.

Continued from page 7 - Annual Scientific Meeting Attendance Booms in Sunny Tampa



◀ 2022 recipient Nancy Hooyman (Top) delivered the Donald P. Kent Award lecture, "Care Justice for Unpaid and Underpaid Care Workers"; 2022 recipient Sheryl Zimmerman (Bottom) delivered the Robert W. Kleeimeier Award lecture, "Reconstructing Person-Centeredness."



▲ GSA welcomed 14 new and seven continuing participants in the Journalists in Aging Fellows Program, which GSA organized for the 14th consecutive year. Half of the participants in the program represent media outlets that serve minority audiences. [GSA's website](#) features links to news articles produced by the fellows, many of which were inspired by their interactions at the meeting.

Catch Up Online

[Program materials from the meeting](#) will continue to be available to registered attendees until December 31. And revisit the social media conversations on Twitter using [#GSA2023](#).

Looking Ahead to 2024

The call for abstracts for the 2024 Annual Scientific Meeting — taking place from November 13 to 16 in Seattle, Washington — will open on February 1. All abstract submissions must be received by March 14.

funding opportunities

NIDUS II Pilot Grants Will Support Delirium Research

The Network for Investigation of Delirium: Unifying Scientists (NIDUS II) will be offering two \$40,000 pilot grants for collaborative research projects related to delirium. The deadline for pilot award letters of intent has been extended to Monday, February 5.

AFAR Welcomes Letters of Intent for Funding

The American Federation for Aging Research has several funding opportunities currently available:

- [The Sagol Network GerOmic Award for Junior Faculty](#) (Letters of intent due December 18)
- [Glenn Foundation for Medical Research and AFAR Grants for Junior Faculty](#) (Letters of intent due December 18)
- [Glenn Foundation Discovery Award](#) (Letters of intent due February 15)

- [Glenn Foundation for Medical Research Postdoctoral Fellowships in Aging Research](#) (Letters of intent due February 25)

ARPA-H Issues Open BAA, Pursuing High-Impact Research Proposals

The U.S. Advanced Research Projects Agency for Health (ARPA-H) has opened its first agency-wide [open broad agency announcement](#) (BAA), seeking funding proposals for research aiming to improve health outcomes across patient populations, communities, diseases, and health conditions. The announcement calls for proposals to outline breakthrough research and technological advancements.

Proposals should investigate unconventional approaches, and challenge accepted assumptions to enable leaps forward in science, technology, systems, or related capabilities. ARPA-H also encourages concepts to advance the objectives of President Joe Biden's Cancer Moonshot, as well as more disease-agnostic approaches.

Staying Connected with ESPO After the Annual Scientific Meeting

By Molly McHugh BSN, RN

The Annual Scientific Meeting is GSA's event of the year, centering cutting-edge research, innovation, and networking with fellow gerontological researchers and advocates. This year's theme of "Building Bridges > Catalyzing Research > Empowering All Ages" provided high-level scholarship from a variety of aging research disciplines. Now that we have all returned from Tampa following this year's meeting, ESPO offers unparalleled ways to stay connected with GSA in anticipation of next year's meeting. In this editorial, we provide several strategies to keep in touch with ESPO as we wait for next year's meeting in Seattle, Washington.

Access Presentation Materials after the Meeting

Missed a paper or poster session you were hoping to attend? The [GSA Annual Scientific Meeting online program](#) offers access to presentation materials until December 31. When logged in with your customer number, you can find contact information and supplementary documents from your favorite presentations.

Subscribe to ESPO Networks Online

ESPO provides multiple ways to keep up to date with ESPO members, events, and opportunities. If you aren't already following GSA on social media, feel free to connect and share your experiences at the most recent Annual Scientific Meeting! ESPO also shares this monthly newsletter column in Gerontology News highlighting ESPO members across GSA. In these newsletters, you can keep up with ESPO events, member spotlights, and more! Finally, the [GSA Connect portal](#) is a flexible way to connect, network, and collaborate online. These membership perks are available to you year-round and allow you to connect with GSA committees, groups, and members.

Connect with ESPO Writing Groups

Join an exclusive GSA ESPO members-only peer-led [Dissertation/Pre-proposal Writing Group](#) for a supportive

environment that fosters creativity, improves efficiency, eliminates procrastination, and helps you stay accountable to your goals. The Dissertation Writing Group is for members who have completed their dissertation proposal and are in the process of writing their dissertation. The Pre-Proposal Writing Group is for members in the early stages of preparing their dissertation proposal. This is a member benefit offered at no cost to you. The 12-week Spring Session runs from January 30 to April 28, 2024. Registration closes on January 5.

Volunteer with GSA

ESPO members can engage with GSA by volunteering in a variety of positions. Volunteers with ESPO can contribute to networking events, ESPO Annual Assembly activities, and webinars. Volunteering with ESPO is a fantastic way to develop leadership skills with colleagues interested in supporting other emerging scholars and professionals. Opportunities to volunteer are regularly posted in the ESPO Community on GSA Connect. For members interested in further developing leadership skills, applications for ESPO officer positions open at regular intervals throughout the year.

Join ESPO Webinars and Virtual Events

ESPO hosts webinars and virtual networking events to stay connected with other members throughout the year. These events are a great way to connect face-to-face with other ESPO members in smaller groups. Updates on ESPO webinars and virtual events can be found via GSA Connect.

The ESPO team hopes you enjoyed your recent GSA Annual Scientific Meeting in Tampa. If we didn't get the chance to connect this year, we hope you take advantage of these opportunities to stay in touch over the year. We look forward to seeing you in Seattle!

new resources

ADRD Care Should Prioritize Equal Access for All, NIA IMPACT Report Says

A new report, "[Voices of the Lived Experience Panel: Health Equity in Dementia Care and Research](#)," summarizes the overarching themes that emerged during four meetings of the National Institute on Aging (NIA) IMPACT Collaboratory's Lived Experience Panel, the Health Equity Team, and the Engaging Partners Team. The goal of these discussions was to learn about panel members' lived experiences and insights related to health equity in dementia care and

research practices. The report documents a conversational process among panelists. Two major concepts emerged. The first is that people living with Alzheimer's disease and Alzheimer's disease-related dementias (AD/ADRD) and their families have different experiences from one another. The second is that there is a need for a broad and inclusive plan to understand and address weaknesses within the systems of care in the U.S., which are often fragmented and lack accountability for health equity.

Continued on page 9

new resources

Continued from page 8

AARP Releases New Edition of LTSS State Scorecard

AARP Public Policy Institute has released the fifth edition of the [Long-Term Services and Supports State Scorecard](#) and [LTSS Choices](#), a multifaceted project and online resource to catalyze the transformation of the nation's long-term care system for older adults and people with disabilities.

More than three years after the COVID-19 pandemic began, the Scorecard finds that care provided in the US for older adults and people with disabilities is painfully inadequate. Major gaps persist in every state, especially related to support for family caregivers, the long-term care workforce, equity in nursing homes and emergency preparedness. The report offers key recommendations to strengthen support for long-term care and aging at home.

Updates to the Scorecard include Innovation Points, a new way to track leading-edge policies that positively impact LTSS state systems. This edition also delves into new focus areas regarding equity, workforce, and the impact of Covid-19, and can be used to assess areas of strength and improvement for states' LTSS systems.

The Scorecard is used by state and federal policy makers, providers, advocates and other stakeholders to analyze LTSS systems

at state levels. The new LTSS Choices website features reports, blogs, videos, podcasts and other resources to showcase innovative models and evidence-based solutions.

The Scorecard is made possible by a grant from AARP Foundation, with support from The SCAN Foundation, The Commonwealth Fund, and The John A. Hartford Foundation, and has been updated every three years since 2011.

AHRQ Aging Roundtable Report Influenced by GSA Members

The Agency for Healthcare Research and Quality (AHRQ) recently released the "[Optimizing Health and Function as We Age Roundtable Report](#)," which explores opportunities such as developing a person-centered care system, and integrating the voices of older adults, caregivers, and communities in designing effective models of care for improving older adults' health and well-being.

The roundtable brought multidisciplinary experts together, including many GSA members, to discuss how AHRQ can impact and research, dissemination and implementation of evidence to improve the organization and delivery of healthcare with the goal of optimizing health, functional status and well-being of the U.S. population as it ages.

journal news

Gerontology & Geriatrics Education Sponsors Students at GSA 2023 as Calls for Papers Issued



(From left to right: Camryn Hafner, New York University drama therapy MS student; Tina Lakhemaru, St. Cloud State University (SCSU) gerontology MS student; Chinyin Oleson, SCSU gerontology minor; Vivian Bonney, SCSU gerontology MS student)

[Gerontology & Geriatrics Education](#), the official journal of GSA's Academy for Gerontology in Higher Education, sponsored three student ambassadors and one volunteer ambassador, at GSA's recent 2023 Annual Scientific Meeting in Tampa, Florida.

Ambassadors attended conference sessions, networked, learned about research and careers in aging, and promoted interest in the AGHE's official journal and its new calls for papers:

- Special Issue: [Diversity, Equity & Inclusion in Gerontology & Geriatrics Education](#) (Deadline: June 1)
- Special Issue: [Technology and Artificial Intelligence in Gerontological Education](#) (Deadline: July 1)

- Special Section: Education's Role in Gerontology & Geriatrics Workforce Development (Rolling submissions — no deadline)
- Special Section: Gerontology & Geriatrics Classroom Best Practices (Rolling submissions — no deadline)

GSA Journals Have Several Open Calls for Papers

The GSA journals regularly invite submissions for special themed issues and sections. Browse our [open calls for papers](#) below and consider submitting your research to one of our leading journals:

The Journals of Gerontology, Series A: Biological Sciences and Medical Sciences:

- [The Impact of Climate Change and Air Quality on Human Aging](#) (Abstracts due March 1)
- [Translational Geroscience](#) (Rolling submissions; no submission deadline)

The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences

- Family Diversity and Dynamics among Older Adults in the 21st Century (Coming soon)

The Gerontologist

- [Bridging Aging and Disability Research](#) (Abstracts due February 1)

Innovation in Aging

- [Innovations to Destigmatize Fecal Incontinence](#) (Abstracts due Feb 1)



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2023 awardees

The following awardees were honored at various events associated with the GSA 2023 Annual Scientific Meeting in Tampa, Florida.

The Society salutes the outstanding researchers below for their contributions to gerontology and thanks the selection panels for their time and efforts in choosing the recipients.

Society-Wide



M. Powell Lawton Award
Sam Fazio, PhD, FGSA
Alzheimer's Association

Academy for Gerontology in Higher Education



Graduate Student Paper Award
Xuexin Yu, MS
University of Michigan



James McKenney Student Travel Award
Kallol Kumar Bhattacharyya
Utah State University



Mildred M. Seltzer Distinguished Service Honor
Nina Silverstein, PhD, FGSA
University of Massachusetts Boston



James McKenney Student Travel Award
Runcie C.W. Chidebe
Miami University, Ohio



Mildred M. Seltzer Distinguished Service Honor
Judith A. Sugar, PhD, FAGHE
University of Nevada Reno



James McKenney Student Travel Award
Elisa Enriquez Hesles
University of Virginia

Continued ▶

2023 awardees

Academy for Gerontology in Higher Education Continued



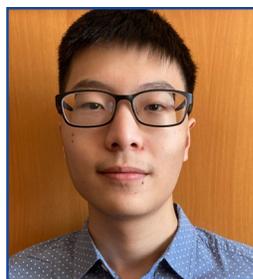
Mildred M. Seltzer
Distinguished Service Honor
Donna Weinreich, PhD, MSW
Western Michigan University



James McKenney Student
Travel Award
Sibó Gao
University of Texas at
Austin



Part Time/Adjunct
Faculty Honor
Michelle Pleasant, PhD
University of South
Florida



James McKenney Student
Travel Award
Justin Lam
Carnegie Mellon University



James McKenney Student
Travel Award
Emily Lim
University of Massachusetts
Boston



James McKenney
Student Travel Award
Lgia Passos
University of Aveiro



James McKenney Student
Travel Award
Yan-Jhu Su
University of Massachusetts
Boston



James McKenney Student
Travel Award
Dana Urbanski
University of Minnesota



James McKenney Student
Travel Award
Hannah Wolfe
Northeastern University

Continued ▶

2023 awardees

Academy for Gerontology in Higher Education Continued



David A. Peterson Award
Colette V. Browne, et al. (2022)
for “Developing a culturally responsive
dementia storybook with Native
Hawaiian youth,” *Gerontology &
Geriatrics Education*, 43:3, 315-327



**David A. Peterson Award
Honorable Mention**
Andrew Perrella, et al. (2022)
for “Assessing the learning needs of
physical medicine and rehabilitation
residents to develop a geriatric medicine
and rehabilitation curriculum,”
Gerontology & Geriatrics Education,
43:1, 119-131

Behavioral and Social Sciences Section



**Student Research Award,
Pre-Dissertation**
Sangha Jeon, MA
University of California,
Irvine



**Student Research Award,
Dissertation**
Zhirui Chen, PhD
The University of
Alabama at Birmingham



**Student Research Award,
Pre-Dissertation**
Emily Morris, MS
University of Michigan



**Boaz Kahana Student
Poster Award**
Soohyeon Ko, BA
Korea University

Biological Sciences Section



George Sacher Award
Nisi Jiang, BS, MS
UT Health San Antonio

Continued ▶

2023 awardees

Emerging Scholar and Professional Organization



Douglas Holmes Award
Karina Tavares, MS
University of Rhode
Island



Poster Award
Taylor Jansen, PhD
University of Massachusetts
Boston



Interdisciplinary Paper
Award
Emily Morris, MS
University of Michigan



Poster Award
Xiaojuan Liu, MS
Stanford University



Poster Award
Tsai-Chin Cho, MS
University of Michigan



Poster Award
Aung Zaw Zaw Phyto, PhD
Monash University



Poster Award
Ambika Verma, PhD
University of Arkansas



Minority Issues in
Gerontology Committee
Student Poster Award
Xiang Qi, BSN
New York University

Continued ▶

2023 awardees

Health Sciences Section



Person-In-Training Award
Kening Jiang, MHS
Johns Hopkins University



Austin Bloch Post-
Doctoral Fellow Award
Louay Almidani, MD, MS
Johns Hopkins University



Research Award
Yurun Cai, PhD
University of Pittsburgh

Social Research, Policy and Practice Section



Elaine M. Brody Thought
Leader Award
Roberta R. Greene,
PhD, FGSA
University of Texas



Outstanding Student
Poster Award
Narcissa Plummer, MPH
Northeastern University



Barbara Berkman Award
James Lubben, PhD, FGSA
Boston College

For information on GSA's awards, visit www.geron.org/Membership/Member-Center/Awards



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