

GerontologyNews

Careers IN AGING —Month—



GSA Enlists Members, Partners in Spreading Awareness of Aging Careers

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Throughout March, which GSA has designated as Careers in Aging Month, the Society and its partners will help individuals, educational institutions, and organizations be the strongest advocates and influencers for careers in aging. On page 2 of this issue,

CEO James Appleby, BSPHarm, MPH, shares a message about why it's more important than ever to speak out about the value of gerontologists' work.

The month is intended to build awareness with college students

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NSHAP Advances Study of Older Adults' Cognition in Post-COVID Era

[A new supplemental issue](#) of *The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences* presents new measures, methods, and data collected during Round 4 (2021 to 2023) of the National Social Life, Health, and Aging Project (NSHAP) – with a focus on cognition and how researchers adapted to working with participants as a result of the COVID-19 pandemic.

NSHAP is a longitudinal, representative study of health, well-being, and social factors among



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Visit the GSA Career Center

AgeWork connects top talent with opportunities in aging. Post jobs, find qualified candidates, and showcase your company – visit agework.geron.org to get started.

Stay Connected



From the CEO

Showcasing the Value of Careers in Aging



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

Welcome to [Careers in Aging Month](#)! This is a moment to celebrate you and the many contributions you've made to the field since deciding to pursue a career in aging. A key GSA role is helping you be successful and advance your vital work – by publishing the field's top-rated journals, hosting the best-attended interdisciplinary scientific conference, offering year-round opportunities to help you connect with collaborators, and serving as your professional "home." GSA also plays a role in keeping the gerontological science "ecosystem" healthy by encouraging new generations to join the field.

To this end, GSA team members just conducted a series of visits to New England colleges and universities as part of the run-up to our Annual Scientific Meeting in Boston. We met with graduate students, postdocs, fellows, and trainees to reinforce the value of gerontology and the importance of engaging with professional membership societies to advance their careers and strengthen the field. During some visits, I also had the opportunity to meet with the provost or president to reinforce the value of the aging-related research and education programs on campus. While many conversations focused on the extraordinary disruption in research funding caused by new executive orders, the passion for advancing new research to advance the aging field was clear.

You, GSA members, have every reason to take pride in your work. Your insightful research is the reason why I can speak with such enthusiasm and certainty when I make campus visits. As we

begin Careers in Aging Month, I encourage you to channel your pride and be vocal about your chosen field of study and how society benefits from your scholarship.

Given the great uncertainty in the scientific community caused by federal policy changes impacting funding for health-related programs and scientific research, it's more important than ever to celebrate your vital roles, and the importance of nurturing the pipeline of future researchers to carry the field forward.

While advancing science is an international endeavor, influencing United States science policy is local. GSA has [established a web page](#) to keep members informed on recent federal actions, and this includes ways to contact your representatives and senators. I ask everyone to express your views on the importance of gerontological research within your institutions and communities, and how U.S. science policy needs to support growth and productivity. And please [share your personal stories with GSA](#) of how the pause in research funding is impacting your work so our policy team can use them in our advocacy efforts in Washington, DC.

We will amplify your voices as we partner with other organizations and play a leading role in coalitions that aim to inform national policy. Despite troubling steps being taken to undermine scientific exploration, we know that gerontology's long-term future is full of opportunity to continue to grow. And we'll make it happen together through the power of careers in aging.

MemberNews

Honors/Appointments/Career Transitions

Gloria M. Gutman, CM, OBC, PhD, LLD (Hon), FCAHS, FGSA, has earned a King Charles III Coronation Medal from the government of Canada. It recognizes individuals who have made a significant contribution or have made an outstanding achievement abroad that brings credit to Canada. Gutman developed the Gerontology Research Centre and Department of Gerontology at Simon Fraser University, and was director of both from 1982 to 2005. She is currently a research associate and professor emeritus at the university.

William E. Haley, PhD, FGSA, has received the William R. Jones Most Valuable Mentor Award from the Florida Education Fund and McKnight Doctoral Fellowship program. This honor recognizes exceptional mentors statewide who have made significant contributions to the fellowship program, which addresses the underrepresentation of African American and Hispanic faculty at colleges and universities in Florida. Haley is a Distinguished University Professor at the University of South Florida School of Aging Studies.

Judith L. Howe, PhD, MPA, FGSA, FAGHE, the chair of GSA's Board of Directors, has been named a professor emerita at the Brookdale Department of Geriatrics and Palliative Medicine at the Icahn School of Medicine at Mount Sinai. She has spent 42

years of her career at Mount Sinai and at the James J. Peters Veterans Administration Medical Center, where she broke ground in fields ranging from team-based training and education to underserved community improvement to rural health delivery and curriculum development.

George Kuchel, MD, was named by former U.S. Health and Human Services Secretary Xavier Becerra to a three-year term on the National Advisory Council on Aging. The council advises the secretary, the director of the National Institutes of Health, and the director of the National Institute on Aging (NIA). It meets three times a year to consider applications for research and training grants. Kuchel is a professor of medicine and director of the University of Connecticut (UConn) Center on Aging and the NIA UConn Older Americans Independence Pepper Center.

Michelle Putnam, MGS, PhD, FGSA, has been named the new director of the Gerontology Institute at the University of Massachusetts Boston. She was previously the Jennifer Eckert '08 School of Social Work Endowed Chair at Simmons University. Putnam also serves as editor-in-chief of GSA's open access journal, *Innovation in Aging*.

Members in the News

On January 9, a Newsweek article titled "[Can Any Ex-President Break Jimmy Carter's Longevity Record?](#)" quoted **Steven N. Austad, PhD, FGSA, Valter Longo, PhD, FGSA, and S. Jay Olshansky, PhD, FGSA**.

On February 2, **James Appleby, BSPHarm, MPH, ScD (Hon)**, [co-authored a letter to the editor](#) of *The New York Times* in response to a column titled "[The Decline in Geriatric Care Hurts Us All](#)."

The Washington Post quoted **Philip D. Sloane, MD, MPH**, in a February 9 article titled "[What to know about sleeping pills and dementia](#)."

Bérénice Benayoun, PhD, was quoted in *The Atlantic* on February 10 in an article titled "[A New Kind of Crisis for American Universities](#)."

We welcome member submissions at news@geron.org!



Member Spotlight

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

[Elizabeth Braungart Fauth, PhD](#)

Member Referral Program

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

Ashley Jennings, EdD, MS (who referred new member **Shania Henderson, BS**)

To learn how you can become eligible, visit: www.geron.org/referral.

Recent Policy Actions



Patricia M. "Trish" D'Antonio
BSP Pharm, MS, MBA, BCGP
Vice President of Policy and Professional Affairs



Thomas Jordan Miles III, BA
Director of Policy

Visit www.geron.org/advocacy to learn more about GSA's advocacy-related activities, including our weekly [Federal Policy Pulse](#) newsletter.

GSA continues to track the impacts of the new presidential administration's actions on health and aging policy. [Follow updates on our advocacy webpage](#). GSA is monitoring these activities through our coalitions, notably Friends of the National Institute on Aging.

GSA hosted two policy webinars in February, now archived for viewing: [New Congress and Administration: Implications for Aging](#) and [Health Care Policy and Advocating for Healthy Aging: Influencing Federal Public Policy](#).

GSA submitted [a letter to the record](#) following a Senate Special Aging Committee Hearing that focused on longevity and aging research, highlighting member evidenced-based research.

[GSA signed on to a letter with the Partnership to Fight Infectious Disease](#) encouraging the Department of Health and Human Services to reschedule its cancelled Advisory Committee on Immunization Practices meeting.

GSA [signed on to a statement with the American Psychological Association](#) supporting researchers, scientists, and academics, highlighting the importance of scientific integrity and research funding.

GSA responded to [a request for comment](#) from the Centers for Medicare and Medicaid Services regarding the agency's coverage rule, offering our support of Medicare Part D covering anti-obesity medications and exempting vaccines recommended by the Advisory Council on Immunization Practices from beneficiary cost sharing.

Budget Bill Takes Aim at Ways to Slash Medicaid Spending

By Brian Lindberg, MMHS, FGSA
GSA Policy Advisor

By now, we've all heard of President Donald Trump's "one big, beautiful bill." Beauty is in the eye of the beholder and in this case, if you are someone who depends on a safety-net program like Medicaid or the Supplemental Nutrition Assistance Program (SNAP) for help

with food, housing, and health care, you won't be seeing the beauty of this legislation. The House of Representatives bill directs the Committee on Energy and Commerce – which has jurisdiction over Medicaid – to find at least \$880 billion in cuts.



Medicaid is a state-federal program that provides health and long-term care services for low-income people who do not have health insurance through an employer and cannot afford to be self-insured. What many don't realize is that Medicaid is a lifeline for older adults who are on Medicare also. Of the nearly 80 million people relying on Medicaid, 12.5 million are older people (known in our field as "dually-eligible"). In fact, [30 percent of all Medicaid spending supports Medicare enrollees](#).

The [Medicare Rights Center](#) sees "Medicare, Medicaid, and the ACA as a set of interconnected programs." For example, "Many people with Medicare have caregivers who are insured through expansion Medicaid, under The Patient Protection and Affordable Care Act (ACA). This includes family caregivers and also formal, paid direct care workers whose [wages lag behind those in other industries](#) and who [often qualify for Medicaid despite working full time](#). If they lose coverage and experience health and financial instability as a result, they may be unable to provide care, putting the Medicare beneficiary's health and future at risk."

There are concrete ways that "reforms" to Medicaid would affect older people, according to [Justice in Aging](#): by using block grants or per capita caps that go into effect regardless of the costs of providing services to beneficiaries; by reducing the Federal Medical Assistance Percentage (FMAP) for certain subsets of states; eliminating the federal-heavy Medicaid expansion FMAP; introducing certain provider and managed care taxes; and/or by allowing for the introduction of work requirements into the program.

[KFF](#) has estimated that under certain scenarios of changes that up to 20 million people could lose their health insurance coverage. On the

chopping block for older people and people with disabilities would be home and community-based services, and dental, vision, and hearing care (services not provided under Medicare). States will be forced to make very hard choices among funding priorities and may limit payments to health care providers and direct care workers, exacerbating the existing shortage of care professionals.

The bill that passed the House provides guidance to the key committees, but a lot of details have been left out. [The New York Times](#) reports, "It puts a \$4.5 trillion upper limit on the size of any tax cuts over the next 10 years, but does not dictate which taxes should be reduced, a complex and politically tricky question of its own that could take months to sort out. It also calls for slashing \$2 trillion in spending over the same period."

With such broad jurisdiction, the Committee on Energy and Commerce could look for about half of their cuts from health care programs (e.g. Medicaid) and half from programs that are colloquially referred to as the "Green New Deal," which work to build resilience against climate change.

How the Senate and governors will respond to such cuts is yet to be seen, as are the impacts (direct and indirect). Some in Congress are looking to see if they can claim some of the Department of Government Efficiency savings to stave off health care cuts.

Hovering over these reconciliation conversations is the fact that the current fiscal year – FY 2025 – is only funded up to March 14. Congressional appropriators are still working on a deal that would fund the government through September and may be staring a government shutdown in the face come mid-March.

and even high school students that there are aging careers and programs that can help them reach their educational and professional goals. GSA recognizes and shares appreciation for researchers, clinicians, educators, and the extended network of aging professionals, caregivers, and staff already working in the field. The activities will include the promotion of numerous disciplines and careers, including direct service, research, and education.

The goal is for Careers in Aging Month to be observed by businesses, clinics, coalitions, organizations, universities, colleges, health care providers, and other parties across the U.S. and worldwide.

Joining GSA on this year's planning workgroup are GSA's Academy for Gerontology in Higher Education Advancement Workgroup, American Health Care Association, Argentum, Erickson School of Aging Studies at the University of Maryland Baltimore County, HOSA Wisconsin: Future Health Professionals, LeadingAge, LeadingAge Kansas, GSA's National Center to Reframe Aging, and Northwood Technical College.

Some ways that you and your organization can help spread the word:

- Share and provide resources from [CareersInAging.com](https://careersinaging.com).
- Work with human resources and other departments to incorporate Careers in Aging Month with other programs.
- Promote Careers in Aging Month through social media, websites, emails, podcasts, webinars, shows/conferences, "career day" events at colleges, etc.
- Create events and programs throughout the month.

Toolkit

Download GSA's 2025 [Careers in Aging Month Toolkit](#) for resources on how to get involved and spread the word.

GSA Enrich Content

GSA has a collection of current and previous recordings of [careers in aging webinars and programs](#).

New in 2025: How-tos

[This series](#) is designed to help educators and organizations implement careers in aging programs and activities.

How To:

- Host a Facility Tour
- Connect with Your Local Schools
- Organize a Careers in Aging Panel Discussion
- Organize a Careers in Aging Career Fair
- Lead a Social Media Campaign for Careers in Aging Month
- Organize an Intergenerational Discussion
- Invite Program Alumni for a Roundtable Discussion

Communication Task Force Shares Vision for Keeping Members Informed



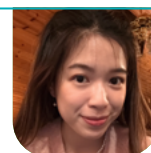
**By Kallol Kumar
Bhattacharyya MBBS,
MA, PhD**

Our ESPO Communication Task Force continues to grow, and this month, I am excited to introduce our team members. We welcome your engagement on any of the topic areas mentioned by participating in the ESPO Community on GSA Connect.

I am a physician-gerontologist, currently working as an assistant professor at the University of Memphis School of Public Health. As part of my new role as task force lead, I will manage this ESPO column in Gerontology News, collect columns from the task force and disseminate ESPO news, manage social media and ESPO posts on GSA Connect, and promote ESPO to new and lapsed members.



**Idorenyin
Udoh, PhD**



**Wan-ling
"Amanda"
Hsu, MS**

Idorenyin Udoh, PhD, and Wan-ling "Amanda" Hsu, MS, will work on e-communications and social media. Idorenyin is an applied aging researcher; she received her doctorate in health services research from the University of North Texas. Amanda is a second-year PhD student in public health studies at Saint Louis University. They will be responsible for all ESPO posts on GSA Connect's ESPO Community. They will also be the liaison to GSA staff for posts that may be beneficial or relevant for ESPO members and GSA at large.



**Guoping
Jin, MSW**



**Eun Young,
PhD**

Guoping Jin, MSW, (as co-lead) and Eun Young, PhD, will work on the monthly ESPO newsletter column. They will reach out to ESPO and GSA members to solicit participation in writing the GSA newsletter articles. Guoping is a doctoral student at the University of Pittsburgh School of Social Work. Eun Young is a postdoctoral associate in gerontology at the University of Southern California. The monthly newsletter brings you ESPO programming, activities, and leadership news and will also provide updates or planned activities that GSA is working to accomplish this year.



**Zexi Zhou,
MA**



**Sagar
Vyavahare,
MS, PhD**

Zexi Zhou, MA, and Sagar Vyavahare, MS, PhD, will help with member outreach and work closely with GSA officials involving ESPO new and lapsed members. Zexi is a fourth year doctoral student in the Department of Human Development and Family Sciences at the University of Texas at Austin. Sagar is working as a postdoctoral fellow in the Department of Medicine (Division of Endocrinology) at Augusta University.

Award-WinningMentors

Award-Winning Mentors Share Career Advice

As part of this Careers in Aging Month issue, *Gerontology News* sought the input of the most recent recipients of GSA's three awards specifically focused on mentorship. They discuss what impact mentorship can have on careers and how GSA can play a role.



David Manuel Almeida, PhD, FGSA,
of Pennsylvania State University
2024 recipient of
the GSA Behavioral
and Social Sciences
Section Distinguished
Mentorship in
Gerontology Award



Lisa L. Barnes, PhD, FGSA,
of Rush University Medical Center
2024 recipient
of the GSA
James Jackson
Outstanding
Mentorship
Award



Dana Burr Bradley, PhD, FGSA, FAGHE,
of the University of Maryland Baltimore County
2024 recipient of
the GSA Academy
for Gerontology in
Higher Education
Hiram J. Friedsam
Mentorship Award

What advice would you give to someone thinking of entering the world of aging?

Almeida: Think of aging as a verb – it's not just something that happens, but an ongoing process. The field of aging is incredibly broad, so keep an open mind and explore different angles, from biological and cognitive changes to social and emotional aspects. I am a social scientist, but I've become really interested in biological and cognitive aging over time. That's the beauty of this field – it's naturally interdisciplinary and spans the entire life course. The best way to grow in aging research is to embrace different perspectives and collaborate across disciplines.

Barnes: Do your homework and get a broad view of the field to understand the key issues for aging. When I started in aging, I began by reading the literature so I could determine who were the thought leaders, what were the hot button topics

in my area, and what were some of the gaps in our understanding. I also talked to other scholars in the field to learn about their interests and experience with aging. Finally, I made sure to present my work and network at the key aging conferences.

Bradley: Know that aging isn't something that happens to "other people." All of us are getting older every hour – and the global longevity economy is reshaping our quality of life in terms of lifespan and health span. With people living longer – with improved health – you can apply your interest in any area to a career in aging. Knowledge opens doors and passion fuels growth. It's a powerful combination to make a difference in our world. And it's needed now more than ever.

What are the essential components of successful mentorship?

Almeida: Good mentorship is all about being available, offering encouragement, and striking the right balance between challenge and support. A great mentor takes the time to guide but also pushes you to think independently. It's important to give constructive feedback while also celebrating progress – big or small. Feeling supported makes all the difference in navigating a career.

Barnes: The essential components are being a good listener and having a flexible mindset

that allows you to build a mutually beneficial relationship. Be open to learning from your mentee just as much as they are learning from you. You should be generous with your time and resources, and you have to be able to have tough conversations when needed to help foster their growth.

Bradley: Passion, commitment, and an unwavering belief in a growth mindset. Recognize the promise and potential of your mentee and the power of perseverance. There is no end to the journey.

What value has mentorship had in your career?

Almeida: Mentorship is fundamental to my professional and personal development. I believe in the idea of “linked lives” – our careers and personal growth shape and are shaped by the people we connect with. I've had mentors who gave me guidance, opened doors, and helped me see possibilities I hadn't considered. Those relationships have been invaluable in shaping my path.

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Barnes: Mentorship has been incredibly valuable in my career. I have learned how to navigate academia, and how to write successful grants and papers. Most importantly, I've learned what are the most helpful and supportive things I can do for my mentees based on the good mentoring relationships I've had. But I've also learned how NOT to be and what things are damaging. I think we can learn something from everyone – good or bad – and turn it into something of value.

Bradley: The most influential mentors in my life have shown me how to learn from both positive and negative experiences. Our success and failure shapes us, and as gerontologists we cannot grow without taking risks. We may fail, but great mentors show how to fail forward.

How does GSA facilitate mentorship?

Almeida: GSA does a great job of creating mentorship opportunities. Whether it's through networking events, structured programs, or informal connections at conferences, GSA helps early-career researchers connect with experienced scholars. These connections are key to learning, growing, and feeling part of a larger research community for both junior and senior scholars!

Barnes: GSA is one of the most welcoming societies that I have been a part of. No matter what you study, what your academic interest is, or what level you are, GSA creates a space where you can develop your skills and nurture your talents. What I love most about GSA is

the intentionality around mentoring. There are abundant networking opportunities throughout the year and exposure to scholars with expertise in so many different areas of aging. If you cannot find a mentor at GSA, you are walking around with your eyes and ears closed.

Bradley: GSA provides the space for professional growth and personal development opportunities to network and meet new colleagues and friends. It creates a bridge that connects us in ways that lead to real and lasting mentoring opportunities. I joined GSA in 1989 – and I'm still discovering and benefiting from my GSA mentors.

HBCUAgingConference

Inaugural HBCU Aging Conference: A Success Story



**By Tamara A. Baker, MA,
PhD, FGSA**
*University of North
Carolina at Chapel Hill*



By Jordan Dudley, BA
*University of North
Carolina at Chapel Hill*

The HBCU Aging Conference is co-organized by the Black in Gerontology and Geriatrics Inc. and the GSA HBCU Collaborative Interest Group. It's the first event of its kind aimed at promoting aging-related research, mentorship, advocacy, and networking opportunities for scholars (and alumni) from Historically Black Colleges and Universities (HBCUs). Our mission to foster the next generation of scholars dedicated to understanding and addressing the unique health needs of diverse aging populations was demonstrated at the first HBCU Aging Conference in Seattle, Washington, in November.

The 2024 conference, titled "Decolonizing Aging Research & Practice: Building an Ethical, Impactful, and Inclusive Future," was an engaging experience that provided knowledge exchange, professional development, leadership training, and mentorship opportunities for students and GSA members. Through panel discussions, interactive breakout sessions, and networking opportunities, attendees gained valuable insights into forging sustainable careers in gerontology/aging research, while also hearing from some of the most renowned scholars and experts in the field.

Nine undergraduate and graduate students from HBCUs and Minority Serving Institutions attended as the first cohort of HBCU Aging Ambassador Program (HAAP) Fellows, representing Grambling State University, North Carolina A&T, Prairie View A&M, Howard University, Chicago State University, and Winston-Salem State University. In addition, the conference featured a collection of dynamic speakers, including alumni from HBCUs, experts from community-based organizations, and representatives from the National Institute on Aging who spoke on the significance of HBCUs in shaping the future of aging research.



The first cohort of HBCU Aging Ambassador Program Fellows

[The 2025 HAAP Fellows application is now open.](#)

As the need for a diverse and knowledgeable workforce in the gerontology discipline continues to grow, HBCUs are an excellent source of talent and scholarship. From the number of current GSA members that are alum and/or current faculty at HBCUs, to students who represent these institutions, the HBCU Aging Conference stands as a testament to the power of collaboration, mentorship, and education in shaping a more inclusive and equitable future for aging research and practice.

Here is how you can apply, learn more about the HBCU Aging Conference, and stay connected:

Website: hbcuaging.org

Email: hbcuaging@gmail.com

Linkedin: [HBCU Aging Conference](#)

Instagram: [@hbcuaging](#)

BlueSky: [@hbcuaging.bsky.social](#)

HBCU Aging Conference Leadership Team:

Tamara A. Baker, MA, PhD, FGS

Darlingtona Esiaka, PhD

Candi Nwakasi, PhD

Jordan Dudley, BA

HBCUs Play Role in Gerontology Through Leadership, Advocacy, and Service



*By Ashley Jennings, EdD, MS,
MS, BS
Bethune-Cookman University*

Historically Black Colleges and Universities (HBCUs) were founded at the turn of the century to afford newly emancipated Black Americans access to education. The role of these institutions was to provide formal training that would help Black Americans acclimate to society. While many HBCUs were founded by missionaries, several have the distinction of being established by prominent Black men and women. Today, the U.S. Department of Education recognizes more than 100 HBCUs, representing approximately three percent of all higher learning institutions.

HBCUs are integral for promoting leadership, addressing underrepresented people, advocating for equity in education and careers, and fostering a supportive community which spans beyond the student body. The HBCU environment naturally exposes students to older Black adults, including faculty and staff who may be alumni of the institution, graduates of a sister HBCU, or long-time employees. Throughout HBCUs there is evidence of students, faculty and staff working cohesively to bridge generational gaps, exhibiting family values, and learning from one another which embodies the goals of gerontology education.

One of the greatest attributes of HBCUs is their contribution to the pipeline of diverse professionals within the aging field. Gerontology's interdisciplinary framework focuses on mitigating health disparities and addressing social determinants of health. As HBCU alumni enter the aging field they bring a

wealth of knowledge that includes research and advocacy to improve the quality of life for Black older adults.

HBCUs with gerontology programs are uniquely positioned to focus on the needs of the aging Black population. Many HBCUs have a Program of Merit designation through AGHE. For HBCUs offering gerontology education, they emphasize cultural awareness, promote safe and authentic interactions, and encourage researchers and health professionals to build rapport within the community. By doing so, researchers and health professions gain critical knowledge needed to serve Black older adults while HBCUs remain strong stewards and support systems.

Many HBCUs are nestled in the heart of Black communities protecting the underrepresented and offering resources that directly support citizens. This may include food distributions, access to campus facilities, programs and partnerships, and other outreach opportunities. At the heart of HBCUs is the concept of family and collective advancement evidenced by more than a century of education and service. As the global older adult population continues to grow, we can anticipate HBCUs will maintain their relevant position in guiding conversations that address health disparities among Black older adults, advocating for social justice, and educating generations of future health professionals.

community-dwelling older adults. Its rounds of data are publicly available through the National Archive of Computerized Data on Aging.

"Cognition is an important component of older adults' health and well-being and thus has been an integral part of the survey measures collected by the NSHAP," wrote Jennifer Hanis-Martin, PhD, and Terese Schwartzman, PhD, of NORC at the University of Chicago, in the issue's opening editorial.

The supplemental issue is comprised of articles that describe the shift from collecting data from respondents in person in their homes to collecting data via remote modes including web, phone, and paper-and-pencil, including a few cases that began in one mode and finished in another.

The issue also addresses the challenges faced in collecting data remotely on cognition and cognitive decline, including among different racial and ethnic groups, and Spanish-speaking

older adults. The articles discuss the effects of different modes of data collection, COVID-19's impact on cognition due to changes in social connectedness, measuring cognition across race and ethnicity, and the risk factors for cognitive decline.

"The articles ... provide insights and guidance for anyone interested in exploring the ways in which social relationships, health, and cognition interact with each other," Hanis-Martin and Schwartzman wrote.

This supplemental issue was supported by the National Institute on Aging, National Institutes of Health (R01AG043538, R01AG048511), and NORC at the University of Chicago, which was responsible for the data collection. The content is solely the responsibility of the authors and does not necessarily represent the official views of National Institute on Aging/National Institutes of Health or NORC.

Board of Directors Meets

The GSA Board of Directors met December 18, led by Chair James Nelson, PhD, FGSA. President Judith L. Howe, PhD, FGSA, FAGHE, provided an update on relevant Society activities. CEO James Appleby, BSPHarm, MPH, provided updates on the 2024 Action Plan, DEIA activities, and strategic activities.

Treasurer Carmen Sceppa, MD, PhD, FGSA, provided a Finance Committee report on the proposed FY 2025 budget; the board accepted the budget as recommended by the committee.

CFO Jim Evans presented the Annual Scientific Meeting site selection for 2029; the board approved the city of Minneapolis, Minnesota, to hold the meeting.

Nelson presented the 2025 election of candidates policies and procedures and a change in bylaws; the board approved the recommendation by the GSA Governance Committee to the 2025 election of candidates policies and procedures, and the change to the GSA Bylaws to allow a reappointed at-large board member voting rights in their second term.

Nelson then led a discussion to appoint an at-large member to the GSA board. The board also approved a prioritized list of candidates for the at-large board member position. Lastly, Nelson honored the 2024 board and celebrated the incoming 2025 board.

RCMARScientistProfile



RCMAR
RESOURCE CENTERS FOR
MINORITY AGING RESEARCH

GSA houses the National Coordinating Center of the Resource Centers for Minority Aging Research (RCMAR) under a cooperative agreement from the National Institute on Aging.

This new quarterly profile series in *Gerontology News*, launching to coincide with Careers in Aging Month, will highlight outstanding RCMAR scientists and showcase the importance of the work they do.



Tony Pham, MD, MScGH

*Psychiatrist and National Institutes-funded researcher,
Center for Health Outcomes and Interdisciplinary Research,
Massachusetts General Hospital*

What projects are you working on in your current position?

After completing my research project as a RCMAR scholar, I applied for and was awarded funding from NCATS [National Center for Advancing Translational Sciences] and the Harvard Catalyst Expanding Inclusivity Pilot Grant to pilot Feeling of Being, a cultural adaptation of mindfulness based cognitive therapy (MBCT) that my community engagement

studio designed as a part of my RCMAR funding. This culturally adapted MBCT will address the specific socio-ecological needs of older Black adults with co-morbid chronic pain and early cognitive decline. I am also funded by an NCCIH K23 award to study the chronic pain depression intersection among older Black adults.

What do you love most about your line of work?

I love that research doesn't feel like work. While screening for my open pilot, an older woman told me she often thinks about how she didn't do enough in life. My parents are refugees from Vietnam who spent their whole lives working to escape communism and only later poverty. When you spend your whole life surviving, I can't help but imagine that some part of that journey can feel discouraging. Admittedly, I knew very little about her, but I couldn't help but think that she led an impactful life. Perhaps she had been comparing her life to someone who didn't have to work to survive.

I admit I come from a privileged background being born in the U.S. and working as a psychiatrist researcher at the Harvard/ MGH Center for Health Outcomes and Interdisciplinary Research (CHOIR). I get to spend my time working as a civic servant to our many knowledgeable and wise seniors while offering them financial reimbursement in exchange for their expertise and time. I get to think about health issues and not only tackle them as a clinician but tackle how I tackle them as a researcher. So much to love about that I don't know what to pick.

What was the best piece of advice you got early on in your career you'd like to pass on to emerging gerontologists?

Work-life integration. I meet weekly with my research mentor Dr. Ana-Maria Vranceanu. We talked about work life balance, and she mentioned how she had replaced work life balance with work life integration in her life. Of course, I pretended like I knew what she was talking about and went home to Google about

it. The concept was simple and yet it shifted my perspective on work and life and perhaps one day not looking back and feeling like I didn't accomplish anything. I'm not perfect, but I welcome any theory that validates by unwavering commitment to biking into work.

How has your experience with RCMAR benefited your career and your research?

My experience and research output as a RCMAR scholar laid the foundation for my current research funding through the NCATS and Harvard Catalyst Expanding Inclusivity

Pilot Grant and now grant application to the Alzheimer's Association and NACC New Investigator Award Program.

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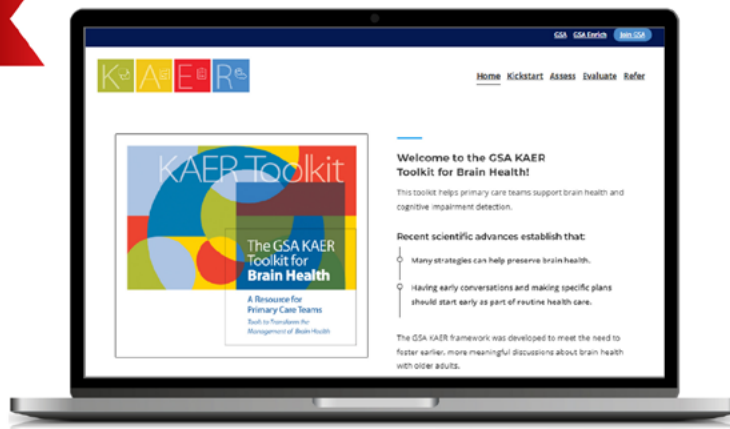
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- [Gerontology & Geriatrics Education](#): Contact Darren Liu, DrPH, FGSA, at darren.liu@outlook.com.
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REMINDER



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GerontologyNews

Volume 56 | Issue No 3 | March 2025



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Gerontology News (ISSN 1083 222X) is published monthly by the Gerontological Society of America, 1101 14th Street NW, Suite 1220, Washington, DC 20005.