

## inside this issue:

- Message from the GSA President . . . . . 2
- New GSA Awardees . . . 8
- New GSA Fellows . . . . 12

## Graduates Eligible for Transitional Membership

GSA offers a transitional status of membership for recent graduates. Those who are currently student members are eligible to receive a reduced annual membership fee of \$134 as they transition into a full-time career. This rate is available for two years. A transitional member also will continue as a member of GSA's Emerging Scholar and Professional Organization.

## Join a GSA Interest Group

Did you know GSA has more than 50 interest groups covering a range of topics? They are a great way for members to connect with others who share their interests. They also help members stay informed about topics outside their areas of expertise. Each GSA interest group has its own GSA Connect community to share information and resources.

## JOIN THE CONVERSATION

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## Wilkerson to Deliver Indy Keynote; Meeting Registration Opens

GSA has selected author [Isabel Wilkerson](#) as the keynote speaker for this November's Annual Scientific Meeting in Indianapolis, Indiana.



Wilkerson

She is a recipient of the Pulitzer Prize and the National Humanities Medal, and the author of The New York Times bestsellers "The Warmth of Other Suns" and "Caste: The Origins of Our Discontents."

Wilkerson earned the Pulitzer Prize for her work as Chicago Bureau chief of *The New York Times* in 1994, making her the first Black woman in the history of American journalism to win the prize and the first African-American to win for individual reporting in the history of American journalism.

She has lectured on narrative nonfiction at the Nieman Foundation at Harvard University and has taught at Princeton, Emory and Boston universities.

In her writing, Wilkerson sheds light on the invisible and the marginalized; in her lectures, she explores the need to "reconcile America's karmic racial inheritance."

"Ever since I read her book 'The Warmth of Other Suns,' I have wanted to attend a talk by Ms. Wilkerson!" said GSA President Peter A. Lichtenberg, PhD, ABPP, FGSA. "Ms. Wilkerson's books expanded my understanding of race in America and her writing is a gerontologist's dream; she illustrates her ideas through the stories of several different African American adults through their life course and into older age."

*Continued on page 6*

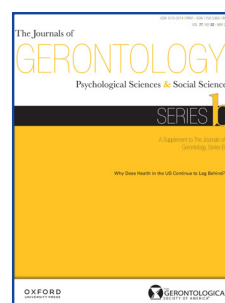
## U.S. Health Outpaced by Other Countries, as Journal Looks for Root Causes

Health and mortality in the U.S. continue to rank poorly compared to peer nations, and a new supplemental issue to *The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences* titled "[Why Does Health in the U.S. Continue to Lag Behind?](#)" features papers that analyze the reasons for the downward trends.

In 2010, according to the journal, life expectancy at birth in the U.S. was a full year lower than the average of 27 European Union countries; in the subsequent decade, the shortfall doubled, and the COVID-19 pandemic has widened the gap.

Even the most affluent U.S. states — those characterized by dynamic gig economies with many highly skilled workers — exhibit outcomes that are on par or lag national averages of other high-income countries. Chronic disease and disability levels are also generally higher in the U.S. compared to many other peer countries.

The supplemental issue was guest edited by



Neil K. Mehta, PhD, of The University of Texas Medical Branch, Mikko Myrskylä, PhD, of the Max Planck Institute for Demographic Research, and the late Robert F. Schoeni, PhD, of the University of Michigan.

"There's no simple answer," Mehta said. "The issue touches on the many complicated factors with a focus on social and behavioral factors. The U.S. has lagged behind for some time, but over the last decade it's gotten a lot worse. Even though the U.S. has fared poorly compared to other countries, we are falling even further behind."

The research articles in this issue include specifics on age groups, death causes, risk factors, and generational patterns.

*Continued on page 7*



## Our Changing World: From ICD-11 to In-Person Meetings

By Peter Lichtenberg, PhD, ABPP, FGSA •  
p.lichtenberg@wayne.edu

Recently, I had the pleasure of celebrating our member volunteers with a sincere “[thank you](#)” and acknowledgement of the time and effort our members put in to make the world better for older people and the gerontology professionals who serve them and whose research continues to move the field forward.

We are an interdisciplinary field, and our views on aging can differ in dramatic and important ways. One such way that came to my attention this year is that the ICD-11 (International Classification of Disorders) classified biological aging as a health condition.

The ICD, created by the World Health Organization, attempts to best understand factors of morbidity and mortality across the globe. What does it mean that aging is now a health condition? How did aging qualify as a unique health condition? What are the implications?

To answer these questions and more, I invited four of our distinguished colleagues to speak at a webinar titled “[Insights and Implications of ICD-11 Codes Related to Aging](#).” It will take place on Monday, July 25, at 12 pm. ET.

All four of the colleagues I invited said yes to being panelists for this webinar and this was yet another example of the volunteer efforts our members put forth. A panelist from each of the four sections of GSA will speak: Matt Kaeberlein, PhD, FAAAS, FAAA, FGSA (Biological Sciences Section), Nancy Morrow-Howell, PhD, MSW, ACSW, FGSA, (Social Research, policy, and Practice Section, John W. Rowe, MD, FAAAS, FGSA (Health Sciences Section), and Becca Levy, PhD, FGSA (Behavioral and Social Sciences Section). From our planning meeting I could see what an important discussion this ICD-11 matter is, and this promises to be an informative and provocative webinar.

We are also four months away from our first in-person GSA annual meeting in three years! Have you been to an in-person conference since the COVID-19 pandemic restrictions began?

Two years after the COVID-19 pandemic was recognized in the U.S., I attended my first in-person conference in February 2022 when I attended the Tamkin Elder Abuse conference. I attended my second in-person conference in May 2022 for a Mental Health and Aging conference. These were memorable and exciting experiences. At each conference care was taken regarding the ongoing nature of the COVID, and yet overwhelmingly there was an air of celebration and joy — to share learning and knowledge in the same place and the same space.

I anticipate GSA’s in-person meeting in Indianapolis, Indiana, from November 2 to 6, to be an exhilarating experience for us all.

I am thrilled that Isabel Wilkerson agreed to be the Opening Plenary Session speaker for the 2022 GSA meeting in Indianapolis. Ms. Wilkerson’s riveting accounts of the African American experience in the U.S. will be of great interest to all of us at GSA given our members’ strong commitment to improving the lives of older people from diverse backgrounds.

Ms. Wilkerson’s 2010 Pulitzer Prize winning book “The Warmth of Other Suns” also stuck with me as a gerontologist because it tells the stories of so many unique individuals and how they each navigated their own paths across their adult life course and into older age.

I found the combination of the unique stories Ms. Wilkerson told along with her enlightening descriptions of the context of the times and population changes to be riveting. In her recent book “Caste,” Ms. Wilkerson explores how the caste system of race was created and endures in America, and its impact on the Third Reich of Nazi Germany. Since Ms. Wilkerson spent much of her career at universities, I believe she understands how to connect with scholars across many disciplines.

I look forward to welcoming you to Indianapolis in November, and I hope to see you online later this month for our webinar on ICD-11.

### editor-in-chief/lead author:

Todd Kluss  
tkluss@geron.org

**managing editor:** Karen Tracy  
ktracy@geron.org

**associate editor:** Megan McCutcheon  
mmccutcheon@geron.org

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## In Memoriam

**Charles Neal Still, MD, FGSA**, passed away on March 24.

After teaching chemistry at Clemson University and then the U.S. Military Academy at West Point during service in the U.S. Army, he received a Doctor of Medicine degree from the Medical University of South Carolina.

He became first full-time neurologist in South Carolina's Department of Mental Health and developed the neurology curriculum for the William S. Hall Psychiatric Institute in Columbia. He began work at the Hall Institute as chief of neurology in 1965 and served there until 1981. He became director of the C.M. Tucker Human Resources Center from 1981 to 1988. After that, he returned to the Hall Institute as associate director of general psychiatry and neurology from 1989 to 1992. Following a brief retirement from employment with the state of South Carolina, he returned to the medical field, becoming a staff neurologist at the Dorn V.A. Medical Center from 1992 until 2004. Concurrently, Still served as a professor of neuropsychiatry and behavioral science at the University of South Carolina School of Medicine Columbia from 1974 to 2004, reaching emeritus status. He was honored to receive the Alpha Omega Alpha teaching Award in 2000, chosen by the medical students of the Class of 2000.

He also served in the following capacities: South Carolina Governor's Advisory Council for Alzheimer's Disease and Related Disorders Resource Coordination Center; president of the Mid-State Chapter and executive board member of the Alzheimer's Association; chair of the South Carolina Department of Mental Health Grants Review Board; and medical director of the Alzheimer's Disease Registry. He served for 12 years as editor emeritus of *The Recorder*, the Columbia Medical Society journal.

**Yung-Ping "Bing" Chen, PhD, FGSA**, passed away on May 10. A native of Shanghai, China, he joined the faculty at the University of Massachusetts Boston in 1988 as a professor of gerontology. In addition to serving as the Frank J. Manning Eminent Scholar's Chair during his tenure as professor, he made important contributions through his role in the provost's office from 1991 to 1994. He retired from UMass Boston in 2009 and had been serving as a professor emeritus of gerontology.

From his work regarding old-age economic security incorporated within some 200 publications, Chen's dedication to gerontology earned him GSA's Robert W. Kleemeier Award for outstanding research in 2010, followed by the distinguished John S. Bickley Founder's Award from the International Insurance Society in 2012.

Chen pioneered the concept of home equity conversion or, reverse mortgages, in the U.S. and developed innovative approaches to the funding of Social Security benefits and long-term care. His scholarship contributed to a better understanding of the economic, political, and social implications and challenges created by the "mass-aging" phenomenon — the ongoing and unprecedented shift to an increasingly elder-populated society.

He participated, either as delegate or consultant or both, in four consecutive White House Conferences on Aging and the 1998 White House Conference on Social Security. He also served on the expert panel for the 1979 Advisory Council on Social Security. He has presented testimony to congressional committees, and consulted for government agencies in the U.S. and abroad. He was also a founding member of the National Academy of Social Insurance and a fellow in the World Demographic Association.

## Members in the News

- John W. Rowe, MD, FGSA, was quoted in a May 25 Observer article titled "[The U.S.'s Low Birth Rate Means the Nation is Headed For a Demographic Crisis.](#)"
- On June 5, a Forbes article titled "[Does Aging-In-Place Work? What We Don't Know Can Hurt Us.](#)" featured an interview with Stephen Golant, PhD, FGSA.

## Colleague Connection

This month's \$25 amazon.com gift certificate winner:  
**Edith Burns, MD, FGSA**

The recipient, who became eligible after referring new member [Allison Marziliano, PhD](#) was randomly selected using randomizer.org. For more details on the Colleague Connection promotion visit [www.geron.org/connection](http://www.geron.org/connection).

## Member Spotlight

GSA's website features monthly Q&A sessions with distinguished members. The current spotlight shines on:  
**Laurie Kennedy-Malone PhD, FGSA, FAGHE**

## Morhardt Tapped for Illinois Supreme Court Commission

Darby Morhardt, PhD, LCSW, a research professor in the Mesulam Center for Cognitive Neurology and Alzheimer's Disease and of preventive medicine in the Division of Public Health Practice at the Northwestern University Feinberg School of Medicine, was recently appointed to the Illinois Supreme Court Commission on Elder Law.

The commission, which became effective April 12, is tasked with helping the Illinois Supreme Court more effectively address the needs and legal issues of older adults and their families in the state of Illinois.

## Bernard Earns JAHF Trustees Award

The trustees of The John A. Hartford Foundation (JAHF) have announced Marie A. Bernard, MD, FGSA, FAGHE, as this year's recipient of The John A. Hartford Foundation Trustees Award for her many years' dedication to improving the lives of older adults through research, education, and clinical practice improvement.

Bernard is recognized for her work enhancing diversity in the sciences, especially in her current role as chief officer for scientific workforce diversity at the National Institutes of Health (NIH). In this capacity, she ensures that the full range of workforce talent is accessed to promote scientific creativity and innovation. She also co-leads NIH's UNITE initiative to end structural racism. Previously, Bernard was the deputy director and senior geriatrician of the National Institute on Aging.

## Hill Action on Retirement and Funding

With summer's arrival in the nation's capital, Congress left behind some of its partisan baggage and passed the Bipartisan Safer Communities Act (PL 117-159), which included some modest firearms control provisions and expansion of community mental health services, including services in schools. They also passed the Keep Kids Fed Act of 2022 (PL 117-158) and a number of bills to improve services to veterans. Yes, it often takes a crisis like the recent shooting tragedies or the federal government on the brink of shutdown to prompt such action, but in the end, progress is often made.

The past couple weeks have also been very productive for retirement policy and funding programs that help enable older adults to live independently. Let's start with funding. Back in May we talked about how the Biden-Harris FY 2023 budget proposal would address the Older Americans Month theme of "Age My Way."

Well, the first major step in the appropriations process took place during the last two weeks of June as the House Appropriations Committee and its 12 subcommittees, including the Subcommittee in Labor, Health and Human Services (LHHS), Education, and Related Agencies, approved all of their 12 funding bills before leaving town for the July 4 recess.

### House Appropriations Move Forward

The House LHHS Appropriations bill and committee report provide more details and the committee's viewpoints on most of the federal programs serving older adults. The bill includes a \$15.6 billion increase for the Department of Health and Human Services (HHS) for a total of \$124.2 billion (slightly higher than the Biden-Harris Administration's budget). The following are some of the highlights from the House bill.

**National Institutes of Health (NIH):** The NIH is once again a priority of the Committee with a proposed \$2.5 billion increase above the FY 2022 enacted level for a total of \$47.46 billion for FY 2023. That total includes funding for initiatives established in the 21st Century Cures Act, including a total of \$216,000,000 for the Cancer Moonshot Initiative; \$541,000,000 for the All of Us precision medicine initiative; and \$620,000,000 for the Brain Research through Application of Innovative Neurotechnologies (BRAIN) Initiative.

**Advanced Research Projects Agency for Health (ARPA-H):** The Biden-Harris budget proposed a major investment of \$5 billion for the newly established ARPA-H; the House bill includes only \$2.75 billion. That is, however, an increase of \$1.75 billion to accelerate scientific breakthroughs on diseases such as cancer, diabetes, ALS, and dementia.

**Mental Health Care:** A major priority for the administration, the bill provides \$3.8 billion (increase of \$1.7 billion) for investments in behavioral health, including prevention, screening, and treatment.

**Geriatric Education:** The geriatrics education funding — Geriatrics Workforce Enhancement Program (GWEP) and Geriatrics Academic Career Award (GACA) program — would receive \$48.245 million, an increase of \$3 million. That would likely fund an additional five GWEP sites under the next funding cycle. The GWEP and GACA program have been a GSA priority.

**Social Security:** The bill includes \$14.4 billion for the Social Security Administration operations (an increase of \$1.1 billion). This is \$400 million less than the president had proposed and is not likely to significantly address excessive waiting periods for disability hearings and benefit determinations.

**Centers for Disease Control and Prevention (CDC):** The bill includes \$10.5 billion, an increase of \$2 billion for the CDC.

**Agency for Healthcare Research and Quality (AHRQ):** The bill provides \$385 million, an increase of \$35 million, for AHRQ.

**Medicare Survey and Certification:** The bill includes \$494 million for survey and certification activities — an increase of \$97 million. This is part of the administration's efforts to address the quality of care in long-term care facilities, particularly in nursing homes.

**Administration for Community Living (ACL):** The bill addresses the growing demand for home and community-based supports and services by providing \$2.9 billion (\$600 million increase) for Older Americans Act (OAA) programs and programs supporting individuals with disabilities.

**Research, Demonstration, and Evaluation Center for the Aging Network:** The House bill includes first-time funding of \$10 million for the GSA-supported Research, Demonstration, and Evaluation Center for the Aging Network, as was authorized in the 2020 OAA Reauthorization. In addition, here are some of the program increases: Nutrition (\$293 million), Home and Community-Based Supportive Services (\$51 million), Preventive Health Services (\$2.6 million), Aging Network Support Activities (\$18.5 million), Aging and Disability Resource Centers (\$1 million), Family Caregiver Support Services (\$36 million), Native American Caregiver Support Services (\$2.5 million), Alzheimer's Disease Program (\$560,000), Lifespan Respite Care (\$6.1 million), Long-Term Care Ombudsman (\$17 million), Native American Nutrition and Supportive Services (\$35 million), and Elder Justice/ Adult Protective Services (\$80 million).

Also worth noting is a new Direct Care Workforce Demonstration funded by the Committee at \$3 million, and an Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities \$1 million. The bill also increases funding for many other programs that benefit older adults in the areas of employment, volunteer opportunities, housing, energy assistance, Medicare counseling, and others.

## Senate Committee on Finance Acts on Retirement Policy

Bipartisan retirement reform is back on the legislative agenda this Congress. You may recall my interview with Cindy Hounsell, president of the Women's Institute for a Secure Retirement (WISER), about the [Setting Every Community Up for Retirement Enhancement \(SECURE\) Act](#) signed December 2019. This bipartisan effort has continued and Congress is now poised to reach a compromise on two bills: the House's Securing a Strong Retirement Act of 2022, known as [SECURE 2.0 \(H.R. 2954\)](#), and the Senate's [Enhancing American Retirement Now \(EARN\) Act](#), which has not been officially introduced.

SECURE 2.0, which passed the House on March 29 by a vote of 414 ayes to 5 nays, is a combination of bills from two committees: Ways and Means, and Education and Labor. The bill aims to expand access to employer-sponsored retirement accounts, in part, by automatically enrolling eligible employees in 401(k) and 403(b) plans (employees can choose not to participate, of course); doubling the credit for small businesses who provide their employees with retirement plans; and expanding access to retirement plans for part-time workers who have been with their employers for at least two years. Another key provision increases the age at which employees with retirement accounts are required to begin taking distributions from 72 to 75. The bill would also allow individuals ages 62 to 64 to contribute up to \$10,000 in catch-up deposits, up \$3,500 from the current limit. See the Ways and Means Committee [press release](#) for links to the bill and summaries.

On the Senate side, the Committee on Health, Education, Labor & Pensions Committee acted first by approving a bill drafted by Chair Patty Murray (D-WA) and Ranking Member Richard Burr (R-NC), the [Retirement Improvement and Savings Enhancement to Supplement Healthy Investments for the Nest Egg \(RISE & SHINE\) Act \(S. 4353\)](#). It aims to promote and protect retirement savings through several paths, including shortening the amount of time a part-time employee must work to qualify for retirement savings, and allowing multiple non-profits to combine forces to provide 403(b) retirement plans. The RISE & SHINE Act contains many provisions similar to those in SECURE 2.0.

On June 22, the Senate Finance Committee voted unanimously to favorably report the chair's modified draft of the Enhancing American Retirement Now (EARN) Act. Like the House's SECURE 2.0, the EARN Act would increase retirement plan access for part-time employees, raise the annual catch-up contribution limit for employees in their early 60s, and raise the required minimum distribution age. Other provisions would allow workers to take retirement account distributions to pay for long-term care premiums without the current 10 percent penalty, or to withdraw retirement funds in cases of domestic abuse, terminal illness, and natural disasters.

Another provision included in the bill, the [ABLE Age Adjustment Act \(S.331\)](#) was championed by the chair of the Senate Special Committee on Aging, Senator Bob Casey (D-PA), and expands eligibility for ABLE savings accounts for individuals with disabilities (similar in nature to a college 529 plan).

One of GSA's policy interns, Hanamori Skoblow, covered the Senate Finance Committee's Executive Session where they marked-up and passed the EARN Act.

She said of the meeting, "Across the board, members praised the bipartisan effort behind this bill. It seemed that both Chairman [Ron] Wyden [D-OR] and Ranking Member [Mike] Crapo [R-ID] were accommodating to one another and the other members. The senators who critiqued the bill all voiced support for it. Senators [Michael] Bennett [D-CO] and [Sheldon] Whitehouse [D-RI] suggested that the bill would provide modest improvements when a larger systemic reform is needed."

See the Executive Session link for statements, the bill, and summaries. Likely next steps for retirement reform legislation include merging the Senate bills and beginning discussions with the House to see what compromises can be made to keep this bipartisan train moving toward the White House.

As you have read, GSA is excited to have a wonderful team of Policy Interns working in the office this summer, and I owe a great deal of thanks to Hanamori Skoblow and Lilian Azer who did the hard work on pulling the information together for this month's article.

## Recent GSA Policy Actions

**GSA** CEO James Appleby, BSPHarm, MPH was invited to serve on the [Healthy Brain Initiative \(HBI\) Road Map Leadership Committee](#), led by the Centers for Disease Control and Prevention and the Alzheimer's Association. The purpose of the committee is to help state and local health departments address brain health across the life course. Appleby will co-chair the Early Detection, Diagnosis and Management Workgroup subcommittee along with GSA member Barak Gaster, MD.

**GSA** is serving as an official [Malnutrition Awareness Week 2022 Ambassador](#) in the fight against malnutrition. Malnutrition Awareness Week is an annual, multi-organizational campaign created by the American Society for Parental and Enteral Nutrition to educate healthcare professionals about the early detection and treatment of malnutrition, educate consumers/patients on the importance of discussing their nutrition status with healthcare professionals, and increase awareness of nutrition's role on a patient's recovery. Celebrating its 10th anniversary, this year's Malnutrition Awareness Week is taking place September 19 to 23 with the theme "Nutrition is a Patient Right."

**GSA**, along with more than 200 public health advocates and officials, signed an [amicus brief](#) in support of the Biden Administration's appeal of an April lower court decision in [Health Freedom Defense Fund v. President of the United States](#), which struck down the Centers for Disease Control and Prevention's public transportation mask mandate.

# new resources

## Report Highlights Discrimination's Role in Health Care

Racial and ethnic discrimination in the U.S. health care system is taking a toll on the health of older Americans and preventing them from getting needed care, according to a new Commonwealth Fund report.

The report finds that one in four Black and Latinx/Hispanic adults age 60 and older reported they have experienced discrimination from health professionals, who either treated them unfairly or did not take their health concerns seriously because of their race or ethnicity. More than a quarter (27 percent) of older adults who reported experiencing discrimination said they did not get the care they felt they needed as a result.

The authors also find that older adults who report health care discrimination are more likely to have worse health, face economic hardships, and be more dissatisfied with their care than those who have not experienced discrimination.

The report, "[How Discrimination in Health Care Affects Older Americans, and What Health Systems and Providers Can Do](#)," offers unique insights about the consequences of perceived health care discrimination for older adults, who tend to use more health services than younger populations

## New RRF Brief Highlights Need for Affordable, Supportive Housing

RRF Foundation for Aging has released an issue brief on one of its four priority funding areas —affordable and safe housing. "[Home Front and Center: Supporting Access to Affordable and Quality Housing](#)" provides an overview of housing insecurity for older adults, describes RRF's approaches to funding

innovative projects promoting safe and affordable housing, and invites others to join them in this important work.

While the issue of accessible housing confronts millions of Americans, the problem is especially acute for older adults, according to the brief. But for those whose access to safe and affordable housing has been limited by economic inequities and discrimination, such as communities of color and LGBTQ+ individuals, the disparities of housing insecurity loom much larger. And with the end of COVID-19 eviction moratoriums, the risk of homelessness threatens many older adults with low or fixed incomes. For these reasons, and more, studies show that the ranks of homeless older people are rising fast, despite a decline in homelessness in other age groups.

## DEC Toolkit Aims to Help Providers Support Diverse Caregivers

The Diverse Elders Coalition (DEC) has released a new resource, "[Caring for Those Who Care — Resources for Providers: Meeting the Needs of Diverse Family Caregivers Toolkit](#)."

The toolkit offers information on what providers need to know about meeting the needs of diverse family caregivers and key pieces from DEC's comprehensive training curriculum, "Caring For Those Who Care: Meeting the Needs of Diverse Family Caregivers."

The toolkit includes fact sheets and diverse family caregiving resources such as information on national caregiving resources, ten things to know about language-access advocacy for older adults, and COVID-19 resources for diverse family caregivers. The toolkit was created by the six members of the DEC with funding from The John A. Hartford Foundation.

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*Continued from page 1 – Wilkerson to Deliver Indy Keynote; Meeting Registration Opens*

Wilkerson said she looks forward to addressing the GSA audience in November, noting the importance of GSA members' work.

The GSA Annual Scientific Meeting will take place from Wednesday, November 2, to Sunday, November 6. Wilkerson's talk will take place on the morning of Thursday, November 3 as part of the President's Opening Plenary Session.

GSA also is [accepting abstract submissions](#) of late breaking poster abstracts and, for the first time, late breaking paper abstracts until

Thursday, August 18. This is an opportunity for scholars to present research results that were not yet available at the time of GSA's original March abstract deadline. The program areas open for late breaking submissions include Academy for Gerontology in Higher Education, Behavioral and Social Sciences, Biological Sciences, Health Sciences, and Social Research, Policy, and Practice.

GSA invites its attendees to register for the meeting by Thursday, September 1, to take advantage of [early bird discounted registration fees](#).

## ESPO Supports ECIs Through Discussions on DEI&B, Social Justice in Grant Writing

By Tingzhong (Michelle) Xue, MS, RN, PhD-C, Lauren Starr, PhD, MBE, RN, and Kristin Levoy, PhD, MSN, RN, OCN, CNE

Despite increasing awareness of the need to embrace diversity, foster inclusivity, and promote social justice in research, early career investigators (ECIs) often experience challenges in effectively designing, executing, and implementing research projects with these goals in mind. For example, ECIs often find the conceptualization/operationalization of diversity, equity, inclusion, and belonging (DEI&B) terminology vague, are unsure of effective recruitment and sampling strategies, and lack clarity on common data elements as well as analysis methods. Thus, ECIs need guidance on how to fully address DEI&B and social justice issues in grant development.

To address these challenges, the ESPO Webinar Task Force hosted a webinar in April called “[Addressing Diversity, Equity, Inclusion, and Belonging \(DEI & B\) in Grant Writing](#).” The webinar covered the core components of DEI&B for developing compelling grant proposals and featured a skilled group of research experts, including Cerise Elliott, PhD, program director of the Division of Neuroscience at the National Institute on Aging; Victoria Behar-Zusman, PhD, professor and associate dean for research at the University of Miami School of Nursing and Health Studies; NiCole Keith, PhD, FACS, professor in the Department of Kinesiology and associate dean of faculty affairs in the School of Health and Human Sciences at Indiana University-Purdue University; and Keith Whitfield, PhD, FGSA, president of the University of Nevada-Las Vegas and prolific scholar in psychology, health, and aging. Lauren Starr, PhD, MBE, RN, a postdoctoral fellow in palliative and end-of-life care at the University of Pennsylvania School of Nursing, moderated a lively discussion.

The panel discussed their experiences in grant writing and gave advice on how to address the challenges mentioned above. Three major take-aways stood out:

### Starting the proposal with solid research questions

Well-developed research questions are indispensable for grant writing. Incorporating DEI&B into research designs requires a deep understanding of the root causes of disparities considering the unique characteristics of the studied populations such as their cultures and microenvironments. Investigators need to provide convincing arguments on what makes the studied populations

different and how the research is adapted to address disparities.

Theoretical frameworks including the multilevel [National Institute on Minority Health and Health Disparities Research Framework](#) and the syndemic framework may help ECIs hone their research questions. A special consideration of between-group and with-group comparisons among diverse populations can also help direct research designs, and is further explicated by Dr. Whitfield in the following reference:

Whitfield KE, Allaire JC, Belue R, Edwards CL. Are comparisons the answer to understanding behavioral aspects of aging in racial and ethnic groups?. *J Gerontol B Psychol Sci Soc Sci.* 2008;63(5):P301-P308.

### Noticing the often-ignored areas of the grant

Some sections of the grant, such as human subjects, approach (e.g., recruitment of women and minorities), and budget, may be more important than many ECIs realize. Presenting detailed approaches to how DEI&B will be addressed by the research and threading these ideas throughout all sections of the grant are especially important. Additionally, how the budget plan reflects these approaches may also influence the overall impression of the reviewers, even though the budget section is not scored.

### Building trust through showing authenticity

Gaining trust from participants of underrepresented or traditionally marginalized groups is the foundation for successful recruitment, and the key is to show an authentic intention for the benefits of the studied population. Investigators can iterate the significance of participating in research and phrase it in ways in which participants can easily relate. One may emphasize that interventions that are tailored to the population the participants represent and that ultimately improve their outcomes can only be made possible with their participation. Providing substantive support such as transportation and services can also address some barriers to participation in under-resourced groups.

In the fall, the ESPO Webinar Task Force plans to host a career development webinar for ECIs. Possible topics may include tips for the job market, transitioning to a faculty role, paths to tenure, productivity, and securing grants. The task force plans to invite both successful ECIs and seasoned researchers to the discussion to answer questions relevant to ESPO members.

*Continued from page 1 – U.S. Health Outpaced by Other Countries, as Journal Looks for Root Causes*

“We see that violence and drug overdoses are both important contributors to the lag,” Myrskylä said. They have both proximal features such as the availability of firearms or prescribing regulations, and structural features in economy and society. It is likely that they interact with each other in complex ways.”

He added that cardiovascular disease and its risk factors also explain some of the lag and may be prominent in recent trends.

“Appropriate interventions would require multi-level social and health care interventions,” Myrskylä said.

This supplemental issue was sponsored by the University of Michigan with support from the National Institute on Aging.

# GSA Honors Outstanding Individuals

Please join us in congratulating our 2022 awardees!

GSA salutes outstanding research, recognizes distinguished leadership in teaching and service, and fosters new ideas through a host of awards. Nominated by their peers, the recipients' achievements serve as milestones in the history and development of gerontology.

The awardees will be recognized at this year's GSA Annual Scientific Meeting, taking place November 2 to 6 in Indianapolis, Indiana. Check the final meeting program for all dates, times, and room location assignments for award events.

## SOCIETY-WIDE AWARDS



**Donald P. Kent Award**  
**Nancy R. Hooyman, PhD, FGSA**  
University of Washington



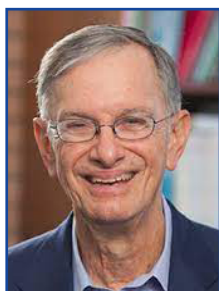
**Robert W. Kleemeier Award**  
**Sheryl Zimmerman, PhD, FGSA**  
University of North Carolina at Chapel Hill



**James Jackson Outstanding Mentorship Award**  
**Maria P. Aranda, PhD, MSW, MPA, FGSA**  
University of Southern California



**Margret M. and Paul B. Baltes Foundation Award**  
**Eric S. Kim, PhD**  
University of British Columbia



**M. Powell Lawton Award**  
**Jon Pynoos, PhD, FGSA, FAGHE**  
University of Southern California



**Maxwell A. Pollack Award for Contributions to Healthy Aging**  
**Nancy Morrow-Howell, MSW, PhD, FGSA**  
Washington University



**Doris Schwartz Gerontological Nursing Research Award**  
**Barbara Bowers, PhD, FGSA**  
University of Wisconsin-Madison



# 2022 awardees

## ACADEMY FOR GERONTOLOGY IN HIGHER EDUCATION



### **Clark Tibbitts Award**

**Laura K.M. Donorfio, PhD, FAGHE**  
The University of Connecticut



### **Hiram J. Friedsam Mentorship Award**

**Rona J. Karasik, PhD, FAGHE, FGSA**  
St. Cloud State University



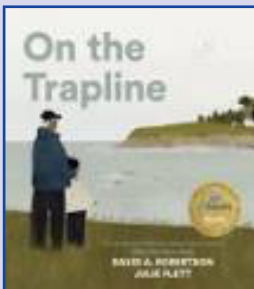
### **Distinguished Faculty Award**

**Christine A Fruhauf, PhD, FGSA,  
FAGHE**  
Colorado State University



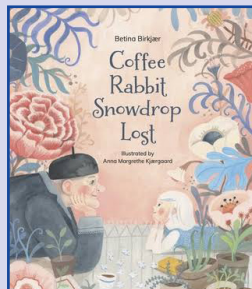
### **Rising Star Early Career Faculty Award**

**M. Aaron Guest, PhD, MPH, MSW**  
Arizona State University



### **Book Award for Best Children's Literature on Aging**

**"On the Trapline"**  
by David A. Robertson

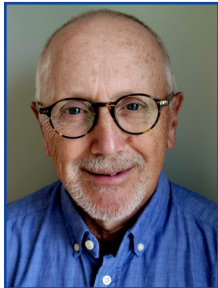


### **Book Award for Best Children's Literature on Aging**

(Honorable Mention)  
**"Coffee, Rabbit, Snowdrop, Lost"**  
by Betina Birkjaer

# 2022 awardees

## BEHAVIORAL AND SOCIAL SCIENCES SECTION



### **Distinguished Career Contribution to Gerontology Award**

**Thomas M. Hess, PhD, FGSA**  
North Carolina State University



### **Distinguished Mentorship in Gerontology Award**

**Karen Hooker, PhD, FGSA**  
Oregon State University



### **Richard Kalish Innovative Publication Award**

**Richard A. Settersten Jr., PhD, FGSA**  
Oregon State University



### **Richard Kalish Innovative Publication Award**

**Glen H. Elder Jr., PhD**  
University of North Carolina at Chapel Hill



### **Richard Kalish Innovative Publication Award**

**Lisa D. Pearce, PhD**  
University of North Carolina Chapel Hill



### **Richard Kalish Innovative Publication Award**

**William Chopik, PhD, FGSA**  
Michigan State University

## HEALTH SCIENCES SECTION



### **Excellence in Rehabilitation of Aging Persons Award**

**Patricia C. Heyn, PhD, FGSA, FACRM**  
Marymount University



### **Joseph T. Freeman Award**

**Neil M. Resnick, MD, FGSA**  
University of Pittsburgh

# 2022 awardees

Please check the final meeting program for all dates, times, and room location assignments for award events.

## SOCIAL RESEARCH, POLICY AND PRACTICE SECTION



**Barbara J. Berkman Award for Outstanding Interdisciplinary Research, Practice, or Policy in Aging and Health Care**

**Susan C. Reinhard, RN, PhD, FAAN, FGSA**  
AARP Public Policy Institute



**Elaine M. Brody Thought Leader Award**

**Robert Applebaum, PhD, FGSA**  
Miami University

GSA thanks the following award sponsors:

The New York Community Trust (Pollack Award)  
Polisher Research Institute of Abramson Senior Care (Lawton Award)  
Margret M. & Paul B. Baltes Foundation (Baltes Award)  
Barbara J. Berkman, DSW/PhD, FGSA (Berkman Award)

Additionally, the following award nominations, along with a variety of travel awards, are open from July 1 to August 2:

### **Academy for Gerontology in Higher Education**

Student Leadership Award  
Mildred M. Seltzer Distinguished Service Honor  
Part-Time/Adjunct Faculty Honor  
Administrative Leadership Honor  
Graduate Student Paper Award  
James McKenney Student Travel Award

### **Behavioral and Social Sciences Section**

Student Research Award  
Boaz Kahana Student Poster Award  
Behavioral and Social Sciences Student Travel Award

### **Emerging Scholar and Professional Organization**

Interdisciplinary Paper Award  
Poster Award  
Douglas Holmes Award  
Minority Issues Poster Award  
Carol A. Schutz Travel Award  
TJ McCallum Memorial Student Travel Award

### **Health Sciences Section**

Austin Bloch Award  
Health Sciences Student Travel Award  
Person-In-Training Award  
Research Award

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

Carroll L. Estes Rising Star Award  
Outstanding Student Poster Award  
Social Research, Policy, and Practice Student Travel Award

To learn more about GSA awards and for more information about our 2022 summer award nominations, visit [www.geron.org/membership/awards](http://www.geron.org/membership/awards).

# new fellows

## Distinguished Members Granted Fellow Status

GSA's Board of Directors has approved the following 38 individuals for fellow status within the Society. In addition to being honored during the Fellows and International Reception at the Annual Scientific Meeting, they will be presented with fellow certificates and pins at their respective section business meetings.

Fellow status is peer recognition for outstanding contributions to the field of gerontology and represents the highest class of membership. This distinction comes at varying points in a person's career and is given for diverse activities that include research, teaching, administration, public service, practice, and notable participation in the Society.

### **Academy for Gerontology in Higher Education**

Skye N. Leedahl, PhD, FGSA, FAGHE, University of Rhode Island; Phyllis A Greenberg, PhD, FAGHE, St. Cloud State University

### **Behavioral and Social Sciences Section**

Adrienne Aiken Morgan, PhD, FGSA, University of North Carolina at Chapel Hill; Cory Bolkan, PhD, FGSA, Washington State University; Sarah Chard, PhD, FGSA, University of Maryland Baltimore County; Jacqueline Eaton, PhD, FGSA, University of Utah; Heather R. Fuller, PhD, FGSA, North Dakota State University; Michelle M. Hilgeman, PhD, FGSA, Tuscaloosa VA Medical Center; Frank J. Infurna, PhD, FGSA, Arizona State University; Amanda N. Leggett, PhD, FGSA, Wayne State University; Christopher Steven Marcum, PhD, FGSA, National Institutes of Health; Molly Maxfield, PhD, FGSA, Arizona State University; Ann Pearman, PhD, FGSA, MetroHealth Medical Center; Patricia A. Thomas, PhD, FGSA, Purdue University; Noah J. Webster, PhD, FGSA, University of Michigan; Tim Windsor, PhD, FGSA, Flinders University

### **Health Sciences Section**

Alyce S. Ashcraft PhD, RN, FGSA, Texas Tech University Health Sciences Center; Fayron Epps, PhD, RN, FGSA, Emory University; Elisa M. Ghezzi, DDS, PhD, FGSA, University of Michigan School of Dentistry; Ying-Ling Jao, PhD, FGSA, Pennsylvania State University; Raya Elfadel

Kheirbek, MD, MPH, FGSA, University of Maryland School of Medicine; Katherine S. McGilton, PhD, FGSA, KITE Research Institute, Toronto Rehabilitation Institute, UHN; Mo-Kyung Sin, PhD, RN, FGSA, Seattle University; Patricia W. Slattum, PharmD, PhD, FGSA, Virginia Commonwealth University; Wanda Raby Spurlock, DNS, RN, GERO-BC, PMH-BC, CNE, FNGNA, ANEF, FAAN, FGSA, Southern University and A&M College, School of Nursing

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

Walter Dawson, DPhil, FGSA, Oregon Health & Science University, Portland State University; Noelle L. Fields, PhD, LCSW, FGSA, University of Texas at Arlington - School of Social Work; Allison K. Gibson, PhD, MSW, FGSA, University of Kentucky; Hee Yun Lee, PhD, FGSA, University of Alabama, Tuscaloosa; Skye N. Leedahl, PhD, FGSA, FAGHE, University of Rhode Island; Hongdao Meng, MD, MPH, PhD, FGSA, University of South Florida; Christina E Miyawaki, PhD, MSW, MA, FGSA, University of Houston; Karon L Phillips, PhD, MPH, FGSA, Trust for America's Health, University of Maryland Baltimore County; Soonhee Roh, PhD, FGSA, University of South Dakota; Huei-Wern Shen, PhD, FGSA, University of North Texas; Caroline Stephens, PhD, RN, GNP, FAAN, FGSA, University of Utah College of Nursing; Leland Waters, PhD, FGSA, Virginia Commonwealth University; Stephanie P. Wladkowski, PhD, LMSW, APHSW-C, FGSA, Eastern Michigan University

To learn more about the nomination process and see a listing of all fellows, visit [www.geron.org/membership/fellows](http://www.geron.org/membership/fellows).

## Students on the Move: Daphne Joslyn, University of Indianapolis

Daphne Joslyn is a dual-degree student at the University of Indianapolis (UIndy), working toward her Master of Aging Studies and Doctor of Health Sciences degrees. She is also a physical therapist assistant (PTA) Program Director in Seattle, Washington. In this issue, she answers a few questions about her background, student life, and commitment to the field of aging.



Joslyn

### What drew you to the field of aging?

There have been many older adults in my life who inspired me. At the age of 85 my grandfather is currently a state senator. I remember meeting his grandmother (my great-great grandmother) when I was five years old and she was over 100. My father ran a half marathon every month until the age of 70 (now he just walks the same distance).

For my family, older age has always been associated with pursuit of passion and staying active. My love for the field comes from those around me who continue to inspire me with their energy and seemingly endless ability.

As a physical therapist assistant, I was fortunate to work with older adults for over 10 years in a professional capacity. Like my older family members, it was my older patients who taught me great lessons during our sessions. I loved listening to their life stories and finding meaningful connections during our treatment sessions.

One of my favorite patients, a World War II veteran, was recovering from surgery and planning a trip to Normandy. As his therapist in the cardiac unit of the hospital, his motivation to participate in therapy inspired me to work harder on his behalf. From my older patients I have learned patience, kindness, and a sense of purpose that only comes with the wisdom of age. Contributing in any small way to a person's physical recovery is a humbling and rewarding experience.

I decided to pursue an advanced degree in aging studies to improve my understanding of the aging process so that I can not only improve the lives of older adults, but advocate for these individuals in the healthcare field and the community.

### What brought you to your particular program and what prompted you to pursue a dual degree with the DHSc?

I am currently a program director for a physical therapist assistant program on the west coast. UIndy's fully online program made the dual degree Doctor of Health Science

and Master of Aging Studies degrees accessible to me. The instructors who teach many of the DHSc courses are physical therapists themselves, so the coursework is relevant to my field and my own teaching.

The doctoral level courses in health science have given me an opportunity to critically evaluate my curriculum and improve my own program while I earn my degree. I decided to pursue a dual degree so that I am able to focus my doctoral studies and dissertation on issues affecting older adults. These are the patients with whom I have worked for many years — I am passionate about them!

### What are your primary research interests within aging? And what would you like to do after you graduate from your two programs?

I began my career as an architect and while in school I became interested in healthcare facility design. The environment in which we spend our time can profoundly influence our emotional well-being and, as a result, the healing process. In architecture school, my thesis focused on "healing the healthcare environment." I have always been interested in the patient experience. After a decade of patient care, that interest has evolved. My goal is to research the substantial impact outdoor environments can have on older adults living with Alzheimer's disease and dementia.

With my design background, therapy experience, and doctoral research, I would love to give back to my community in a way that positively impacts the lives of those living with these conditions. I hope to be the voice for improved and accessible outdoor spaces, dedicated memory gardens, and the availability of horticulture therapy as a treatment option for older adults with dementia.

### What has been your most impactful learning experience so far in your program(s)?

In the dual degree program at UIndy, there is so much more diversity in the assignments than I ever imagined there would be in an online degree. There have been many learning experiences that challenged me, particularly because I have always thought of myself as a strictly "in-person" learner. The Instructional Design and Delivery course in the DHSc program made a huge impact on my career and teaching style. The techniques I learned in that class changed the way I delivered content and designed many of my courses. I use tools and techniques learned in that course to instruct my own instructors. It really is exciting to be in this program!

# journal news

## [The Gerontologist Looks at Social Determinants of Health Through Racial Lens](#)

Resulting from the first call for papers of its kind, *The Gerontologist* has published a new special issue, "[Social Determinants of Health in the Context of Race and Age](#)," which offered those with an interest in intersectional scholarship an opportunity to apply non-traditional theories, methods, and analysis to the study of gerontology.

Brandy H Wallace, PhD, FGSA, and Suzanne Meeks, PhD, FGSA, writing in the issue's opening editorial, state: "More than 35 years ago, Black feminist scholar Audre Lorde addressed the imperative to challenge dominant epistemological frames and methods. The 'standard tools' by which most disciplines, including gerontology, have built knowledge are not conducive to shifting our focus from simply documenting disparate treatment, whereby communities of color are often represented through a comparative lens, to equity in health promotion — grounded within culturally- and historically-relevant context.

The authors in this issue present intersectional approaches to racialized aging and provide contemporary modes of interrogating the variation in the minority aging experience while also confirming the importance of disaggregating data. Taken together, these papers reveal patterns and address gaps that are not often reported in gerontological studies of racial/ethnic minority older adults and emphasize the importance of various institutional efforts (e.g., policy initiatives and healthcare interventions) that focus on providing community-specific resources to underserved populations.

## [Institutional Funding Available for Open Access Publishing](#)

Authors interested in publishing in the GSA journals may be able to publish their paper Open Access using funds available through

their institution's agreement with Oxford University Press (OUP). OUP has read and publish agreements with institutions and consortia that provide funding for Open Access publication. This means authors from participating institutions can publish Open Access, and the institution will pay the charge. To learn more if your institution is participating, visit OUP's [Funding for Open Access page](#) online.

## [GSA Journals Begin Publishing Graphical Abstracts](#)

Authors are now able to submit a graphical abstract as part of their article submission, in addition to the required text abstract. The graphical abstract should clearly summarize the focus and findings of the article and will be published as part of the article online and in PDF. The graphical abstract should be distinct from any of the submitted figures. The file should use simple labels and employ text sparingly. [An example of the GSA journal graphical abstract can be seen online](#). Review each journal's author guidelines for additional information.

## [GSA Launches Manuscript Writing and Reviewer Skills Program](#)

GSA is offering a live webinar series with practical advice on manuscript writing and reviewing. Graduate students and emerging professionals as well as experienced scholars who want to hone their writing and reviewing skills and become more involved in the publishing process will benefit from the hands-on practice, discussion of the "human side" of publishing, pointers from authors of manuscripts accepted by journals, and the insiders' view with a panel of editors on what constitutes a good paper. [Register online for the GSA Manuscript Writing and Reviewer Skills Program](#).

# funding opportunities

## [MBRF, AFAR Team Up to Offer Grants on Memory Loss](#)

The McKnight Brain Research Foundation (MBRF) and the American Federation for Aging Research (AFAR) are now welcoming applications for the [McKnight Brain Research Foundation Innovator Awards in Cognitive Aging and Memory Loss](#). This opportunity will provide up to two 3-year awards of \$750,000 each to advanced assistant professors and recently appointed associate professors (MDs and PhDs.) One award will be made to support studies focusing on clinical translational research and another award toward understanding basic biological mechanisms underlying cognitive aging and age-related memory loss. Applications are due August 1.

## [Three NIA Small Grant Opportunities Will Support Alzheimer's Research](#)

The National Institute on Aging (NIA) Small Research Grant Program for the Next Generation of Researchers in Alzheimer's

Disease supports important and innovative research in areas in which more scientific investigation is needed to improve the prevention, diagnosis, treatment and care for Alzheimer's disease and related dementias (AD/ADRD).

Awards are two years of funding totaling \$200,000, and the application is October 16. The expiration date for this award is November 17.

There are three funding opportunity announcements:

- [PAS-19-391 Area of Focus Archiving and Leveraging Existing Data Sets for Analyses \(R03 Clinical Trial Not Allowed\)](#)
- [PAS-19-392 Area of Focus Basic Science \(R03 Clinical Trials Not Allowed\)](#)
- [PAS-19-393 Area of Focus Systems Biology \(R03 Clinical Trial Not Allowed\)](#)



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start building your network.**

# SAVE THE DATE



# GSA 2022

Embracing Our Diversity. Enriching Our Discovery.  
Reimagining Aging.

November 2-6, 2022 | Indianapolis, IN



**EARLY BIRD PRICING ENDS SEPTEMBER 1, 2022**

Join the Gerontological Society of America and more than 3,700 professionals in the field of aging from around the world as we gather in-person for GSA 2022. Learn the latest trends, research, and developments from industry leaders, build strategic partnerships to address aging challenges, and network with peers!

**REGISTRATION NOW OPEN**  
**[GSA2022.org](https://GSA2022.org)**

