MISSION
The Institute of Gerontology at Wayne State University conducts research in the social and behavioral sciences and cognitive neuroscience on issues of aging and urban health. We improve our community’s health through research. We educate tomorrow’s leaders in aging research and connect seniors and their families to current knowledge. Our partnerships build pillars to support every corner of our mission.

Follow the faces of aging throughout this year’s annual report and you will see a gallery of joy, character, and beauty. No stock photos here – every portrait depicts an older adult who has taken part in an IOG event. These are the real people who learn at our forums, who dance at our fitness workshop, who paint for our Art of Aging Successfully conference, and who follow the health advice of our experts. In the past decade, the number of people who became a part of the IOG grew from a few hundred to several thousand.

You are one of them.
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Editor: Cheryl Deep / Design: Catherine Blasio / Photography: Rick Bielaczyc
New Year. New Challenges. New Successes.

Our annual report this year takes a fresh approach toward documenting the achievements of the Institute of Gerontology. We describe what’s new in our research, education and outreach by theme, discussing specific accomplishments in the context of our strategic focus. Our mission is to help people age successfully. To do that, we concentrate on: minority health, disability, student training, mental health, professional education, lifespan cognitive neuroscience, and financial gerontology.

We hope this blended style makes the annual report more readable and interesting, as we share the compelling stories of our journey to improve the aging process. Highlights include:

**Two new faculty members in the Lifespan Cognitive Neuroscience Lab** who use MRI scans of the brain to chart development. Dr. Noa Ofen, from the Massachusetts Institute of Technology (MIT), studies typical and atypical brain function in young adults. Dr. Moriah Thomason from Stanford University studies how brain structure changes in response to anxiety in 7 to 15-year-olds.

**An explosion of interest in our professional development conferences.** We organized 66 continuing education workshops last year, up from 48 the year before and only 2 in 2005, to reach more than 3,600 professionals who work with older adults. We are – without a doubt -- raising the standard of gerontology training in the Detroit area. We also educated an astounding 2,800 older adults in our outreach programs.

**The health of minorities, particularly older African Americans and Latino Americans,** concerns us deeply as disparities in diagnosis, treatment, and general well-being stubbornly remain. Compared to their Caucasian counterparts, Latinos and African Americans are less likely to receive adequate treatment for depression and nearly twice as likely to develop diabetes. Both groups have much higher rates of HIV infection, and African Americans are more likely to die from cancer than any other racial or ethnic group. Our research commitment will not cease until we better understand, and are able to reverse, these disparities.

**Lifespan analysis of multi-generational issues** like the relationship between grandparents and grandchildren. Lifespan research is jointly executed by faculty at the IOG and its sister organization the Merrill Palmer Skillman Institute for Child & Family Development. This year we interviewed 501 grandparents providing kinship care for their grandchildren to dispel myths and unearth the truths about this novel bond.

Aging is everywhere and affects everyone. Each day more than 10,000 people in the United States turn 65, a pace that will continue for the next 19 years. We promise to work hard to keep up with the dynamic changes this trend will bring. As always, we thank you for supporting our goals and for caring enough about our work to read this report each year. The research and education we provide today will help determine how well we age tomorrow.

Age Well,

Peter Lichtenberg, Ph.D., ABPP
Director

Dr. Lichtenberg received the 2011 John Santos Distinguished Program Development Award for his outstanding service to gerontology education and research.
Mental Health

Minority Mental Health and Health Care Disparities

Neuropsychiatric conditions, such as depression and dementias, are the leading cause of disability in the U.S. and the world. “These are public health priorities of the highest order,” says Dr. Hector González. “And they will continue to be for the coming decades.” Dr. González’ research focuses on affordable and tolerable means for detecting and mitigating vascular, cognitive and dementing disorders at the population level.

Results from his ELLDERS project – Epidemiology of Late-Life Depression and Ethnicity Research Study (see Research Capsule) – have met some resistance from the professional community. “We’ve had a hard time convincing reviewers and other scientists that there are subtypes of major depression,” he says. “It is innovative research. They should be skeptical. We are challenging the status quo.”

Dr. González’ newest project is with the 16,000 person Hispanic Community Health Study/Study of Latinos (SoL). He heads the Neurocognitive Reading Center of the study where 10,000 Latinos ages 45 years and older will be cognitively assessed. They are using several affordable and well-tolerated biomarkers and neurocognitive measures to look for early predictors of cognitive decline and dementia. “They hope that with early detection we can mitigate the devastating affects of dementia. We are also testing new hypotheses I developed about acculturation and health across the life course in the SoL,” he says. “I expect to be able to publish 10 to 20 peer-reviewed research manuscripts from the data in this baseline survey. This is exciting work.”

Training Home Care Workers to Spot Mental Health Problems

Aides, nurses and therapists who visit the home to care for older adults can be the first observers of significant mental changes in their patients. Early symptoms of depression, dementia, delirium, and mental confusion may show themselves to home care workers long before they are obvious to family members or even physicians. “These professionals are in a unique position to assess mental health functioning,” says Dr. Cathy Lysack, “but they often receive little training in the practical skills needed to do this.”

To correct this, Drs. Lysack and Lichtenberg created a seven DVD set of training modules for home care workers, particularly occupational therapists. Several hundred training sets have been sold across the country, and the modules were recently converted into an online training course offered through CHEX eLearning. To test whether the training really changes the therapists’ willingness and ability to identify mental health issues, Drs. Lysack and Lichtenberg conducted a two-year evaluation of its effectiveness. They trained the trainers in home care agencies and evaluated the outcomes on a large sample of OTs.

Preliminary data show significant improvement in how OTs handle mood disorders and a greater willingness to use their new skills in daily practice. “Depression and cognitive impairment are greatly under-detected in our society,” says Dr. Lichtenberg. “Empowering home care workers to identify mental health issues and refer them for treatment will have a positive effect on a large number of lives.”
The IOG’s research into aging and disability investigates the challenges people face as they navigate through the process of getting older. Driving a car, needing a wheelchair, moving to a smaller house, adapting to sudden or chronic health conditions—all these changes offer insights into how older adults manage major social and physical transitions in late life.

IOG Deputy Director Dr. Cathy Lysack is a professor of occupational therapy who works closely with professor of anthropology and gerontology Dr. Mark Luborsky. Their partnership is well-rounded. One of Dr. Lysack’s research goals is to provide new knowledge to assist rehabilitation professionals in their work with patients. “I want to provide better assessment tools or stronger proven evidence for better interventions,” she says. “We need to know how people live out there in the real world. I want tools we can really use in practice.”

Dr. Luborsky takes a cultural approach and is interested in how people experience disability, chronic illness or other major life changes. When he and Dr. Lysack studied how people downsize, Dr. Luborsky pursued open-ended questions of the meaning behind how possessions were saved or shared. “I started thinking about the concept of time,” Dr. Luborsky says,

“We need to know how people live out there in the real world. I want tools we can really use in practice.”

— Dr. Lysack
Spinal Cord Injury and Self-Rated Health

One hundred forty persons with SCI were asked to rate the quality of their health. Results showed that there was no relationship between injury severity and a rating of poor health. Clinicians are reminded that disability and health status are not the same thing. Self-rated health is important because it is a powerful predictor of mortality in aging and may have similar predictive abilities in other populations.

Downsizing Possessions for Residential Moves in Later Life

Personal interviews with 60 householders, at least 65-years-old, about their move to a smaller space. Cherished possessions represent personal history and meaningful experience. The story attached to the item reveals its value.

Self-Rated Health and Successful Aging

Researchers compared subjective and objective measures and found they don’t always align. Interestingly, subjective perceptions are more powerful predictors of current health than a blood pressure reading. Studies like these remind clinicians to attend closely to patients’ complaints and rationales as they provide powerful clues to the achievement of good health.

Rusting in Place: State of Michigan Survey

An analysis of 600 Michiganders reveals the negative fall-out from the 2008 economic downturn. The housing market collapse has many older adults with considerable uncertainty about a secure retirement. What will their future be?

Research Capsules

Faculty researching disability

Dr. Peter Lichtenberg
Dr. Mark Luborsky
Dr. Cathy Lysack
Dr. Stewart Neufeld

For Dr. Lysack, there is also the interest in how a new space, a new home, can be refashioned and remade to support those activities and routines that are most important to the person. “As we age, our focus on the home tends to be related to safety and function,” she says, “but we may be missing an opportunity to use objects to support meaningful habits that also contribute to good health.”

Their different disciplines cause Drs. Lysack and Luborsky to approach research from multiple angles and to bridge concepts between older adults and other age groups. The bottom line is to provide new understanding that can help older adults and people with disabilities. In her teaching, Dr. Lysack reminds students to appreciate that their client’s goals for a successful life after rehabilitation may be different than their own. Clinicians are charged with many important short-term goals like safe transfers from a wheelchair, but a patient may not care much about that; they want to do what matters most, maybe finding a partner, starting a family, contributing to a satisfying job, or helping a family member in need.

“These are people with lives,” Dr. Lysack reminds students. “To the extent that research can provide answers to their most pressing concerns, we have done something worth doing.”
Brain aging is not a discrete event that happens overnight but a long stretch on the developmental continuum,” says Dr. Naftali Raz, director of the Lifespan Cognitive Neuroscience Program at the IOG. Created through the Lifespan Alliance, a collaboration with the IOG’s sister institute, the Merrill Palmer Skillman Institute for Child & Family Development, the program seeks to understand when, how and why the brain changes and how those changes affect thought and behavior.

In October, Dr. Raz hosted the Margret and Paul Baltes International Conference on Lifespan Cognitive Neuroscience. Top neuroscientists from Europe and the U.S. discussed neural plasticity, the brain’s ability to alter its structure and function in response to experience. The goal is to build interdisciplinary bridges to inspire fresh research approaches to problems like dementia and pediatric anxiety disorder.

Four faculty members conduct research through the Lifespan Cognitive Neuroscience Program. Director Raz’ neuroimaging studies of healthy adults have revealed differential shrinkage of brain tissue. His goal is to delineate the causes of this shrinkage, both genetic and health-related. “Charting individual age-related change is challenging but may hold the key to expansion of the human health span,” Dr. Raz says. He has been continuously funded through the National Institutes of Health since 1993, and he also is a recipient of a MERIT award through the National Institute on Aging.

Dr. Scott Moffat heads a four-year grant to investigate the effects of the stress hormone cortisol on the structure and function of the brain. His team assayed over 8,000 urine samples from more than 2,000 individuals in the Baltimore Longitudinal Study of Aging to chart the association between cortisol exposure and cognitive and neural outcomes. One early finding is that higher cortisol levels are associated with greater decline in verbal memory. “We are trying to understand the marked individual differences in brain function and volume as people age,” says Dr. Moffat. “We think cortisol exposure may play a role in that.”

Though memory problems in older adults are the subject of extensive research, little is known about the development of memory systems in children and young adults. Dr. Noa Ofen joined the cognitive neuroscience program in August (from the Massachusetts Institute of Technology) to focus on brain development in 5 to 30-year-olds. She uses functional magnetic resonance imaging (fMRI) to track where memories are encoded in the brain at different stages of development. “I’m interested in the clinical applications of what we learn about memory development,” she says. “How can we help patients with memory deficits?”

Dr. Moriah Thomason joined the program earlier this year from Stanford University as a faculty member at the Merrill Palmer Skillman Institute. Like Dr. Ofen, she uses fMRI to scan children’s brains but concentrates on anxiety disorders in adolescents age 7 to 15. “I’m fascinated with how children develop inside and out, the ties between emotional behavior and the brain’s chemistry, function and structure,” she says. She is also helping to conduct large-scale fetal imaging in utero to study the networks that connect the brain. Someday diagnosis and treatment of problems could occur before symptoms appear. “This is an amazing opportunity to make a large difference in a lot of lives,” she says.
The Financial Uncertainties of Growing Older

As the years pass, many of us will face challenges to our physical health, but how many of us will consider the effect of those challenges on our financial health? Money matters, according to Dr. Stewart Neufeld, because it determines the kind of life we lead in later years. “We used to think baby boomers would be richer than their parents, retiring early to frolic on the beach and pursue hobbies,” he says. “Now their retirement looks a lot more like their great-grandparents’ with people working as long as they can and then relying on family to help them as they age.”

Healthy Body, Healthy Wallet

As an award-winning professor of health economics and gerontology, Gail Jensen Summers, Ph.D., thinks about the long-term financial consequences of the health decisions we make each day. Recently she has concentrated on two areas: the financial impact of not taking prescribed medications, and why about half of all people who purchase long-term care insurance let their policy lapse within 10 years of purchase. “This is a terrible shame because these policies are expensive,” she explains. “A lot of money is wasted.”

Health economics is a fairly new major at Wayne State. Dr. Summers co-created the field when she came to the university in 1989. Today it is the most popular area of economics at Wayne, with more students writing dissertations in health economics than in any other specialty within economics. “We always have excess demand for our IOG training program,” Dr. Summers says proudly. Thanks to health care reform, the call for trillions of dollars in national debt reduction, and Medicare as a favorite target, “health economics and financial gerontology will be a keen area for some time to come.”

Dr. Summers’ current research has yielded interesting and significant results. Her study on medication non-adherence (conducted with Yong Li, Ph.D., a former pre-doctoral trainee) has found that older adults with chronic conditions such as diabetes or hypertension, who stop or cut back on their prescribed meds, put themselves at higher risk of experiencing costly hospitalizations, heart attacks or strokes. For some, these added health problems lead to early retirement and reduced incomes. The short-term savings in not taking the medication is erased many times over by the long-term costs of poorer health. “Penny wise and pound foolish,” Dr. Summers says. “Prescription drug insurance has an incredibly protective effect against this non-adherence. It can cut the likelihood in half.”

Her other major research is investigating why so many people let their long-term care insurance lapse. In any recent 10-year period, over half of all persons who purchase this insurance stop paying premiums. The reasons seem to vary, but include the high expense of these policies, as well as disillusionment in the value of such coverage after actually using long term care services. “Most policies are highly

Visit:
www.seniorscount.org

View current in-depth analysis and interpretation of secondary demographic, economic, and social data on older adults in the 7-county Southeast Michigan region.

Access reports for counties regarding:
• Behavioral Risk Factors Profile
• Community Health Status Indicators
• Demographic Profile
• Economic Profile
• Health Profile

The Health Profiles include information at the county level on cancer, hospitalizations, leading diagnosis for hospitalizations, mortality, disability, access to fresh food, and National Aging Program Information System (NAPIS) data.
Financial Gerontology

restrictive. A subscriber must satisfy numerous criteria before being eligible for benefits,” Dr. Summers says. “People tend to learn this the hard way.” Dr. Summers advocates for better consumer education about these policies and greater supply-side regulation to reduce the rate of lapsed policies.

As thousands of Americans turn 65 each day, the relevance of Dr. Summer’s research strengthens. Her findings are nationally recognized and have been cited by federal policy makers. Wayne State University recognized the national significance of her work recently with a two-year Distinguished Faculty Fellowship. This prestigious honor is granted to a select group of faculty; Dr. Summers is the first IOG faculty member to receive it. “I am very proud to have been selected,” she says. “I take my work seriously and always strive to do the best I can.”

Protecting Older Adults from Fraud

Older adults are highly vulnerable to scams. One in 10 Detroit seniors reported being scammed in the past year; one in 20 are scammed across the country. Dr. Lichtenberg (with pre-doctoral trainee Daniel Paulson) wondered whether specific psychological characteristics of older adults open them to these fraudulent manipulations. His findings — that feelings of loneliness and being undervalued increased the risk by 30% — reached 26 million readers in the AARP’s Bulletin and Magazine. “Older adults can be befriended easily,” Dr. Lichtenberg says. “The con artist is often an older adult trying to establish commonality and create a sense of trust and shared values.” He deflates the myth that older adults are scammed because they are financially unstable or their minds are failing. “These scammers are pros. They exude oodles of charm and use a low-pressure sales pitch. Plus their age itself is disarming.”

Dr. Lichtenberg’s fraud studies are increasingly germane as the rate of scams against older adults rises during the economic downturn. Scammers and their victims are more desperate to make money any way they can. Earlier research by Dr. Lichtenberg showed larger numbers of seniors at casinos, too, many at high risk of a gambling addiction.

Why Do People Let Their Long-Term Care Insurance Lapse?

Analyzed data on 2,085 policyholders from 2002-2008 to learn why about half of them eventually drop coverage.

1 in 3 Michigan Seniors Struggling To Pay Basic Living Expenses

Dr. Thomas Jankowski and his team of Jason Booza, Ph.D., and Carrie Leach, created Seniors Count! two years ago to compile and publish accurate, accessible statistics on the social, economic and health status of southeast Michigan seniors. By mining data from multiple sources, the team has uncovered critical trends in the economic health of our older adult population.

Findings of “invisible poverty” in about 37% of Michigan’s retired population were released this spring and roared through state media outlets. While seemingly stable to friends and neighbors, many Michigan seniors reported incomes so low they struggled each
so much money in home equity lines of credit. Dr. Neufeld is now applying for grant funding to determine the distribution of home value and mortgage debt among boomers. What are their prospects in retirement? “It’s hard to lead a decent life, do the things you like and pay for health care, if you are really poor,” he says.

Hidden Costs Erode Retirement Savings

Americans have been scolded for not saving enough for retirement, but those who do save may be surprised at how much of their fund is spent on account fees. Dr. Neufeld analyzed the costs associated with mutual fund accounts: the management expense ratio, commission fees, and all trading costs. “These can be difficult to calculate because many of them aren’t obvious or even available to the consumer,” he says. “They aren’t in the prospectus.”

The difference to the bottom line between a fund with low costs and one with average costs is sizeable. Over long periods of time, average fees can steal about 75% of the gains. “You would have to be very lucky in the market to offset those deductions.” Dr. Neufeld would like to see more transparency in financial fees so consumers can compare the true costs. His results will be published in the December issue of The Journal of Financial Planning.

Even people in their 70s … have a lot more debt than they used to.”
– Dr. Neufeld

Debt Heavy and House Poor

Housing prices continue to tumble begging the question of how much equity people now have in their homes. Dr. Stewart Neufeld, with a doctorate in mathematics, seeks the data behind the headlines. He used a nationwide survey of consumer financial data, the S&P/Case-Shiller Home Price Index, and the aggregate amount of house debt and equity from the Federal Reserve’s Flow of Funds accounts. Since 1989, what has the trend been in mortgage debt and house equity?

“The amount of housing-related debt in every age group has gone up hugely,” Dr. Neufeld says. “Even people in their 70s, who have retired, have a lot more debt than they used to.” The percentage of equity built up in a home has declined for all age groups, but older people (more likely to have owned a home longer) show less decline. “On average everyone under age 65 has 50% less equity than they did in 1989,” he says. Equity declined even during the housing price run-up from 2001-2007 because homeowners withdrew

Prospective Predictors of Fraud in Older Adults

Data collected from the 2002 and 2008 Health and Retirement Survey, a lengthy questionnaire about the financial status and social engagement of 5,849 older adults. Loneliness and feeling undervalued often precipitate being scammed.

Prospective Predictors of Fraud in Older Adults

Data collected from the 2002 and 2008 Health and Retirement Survey, a lengthy questionnaire about the financial status and social engagement of 5,849 older adults. Loneliness and feeling undervalued often precipitate being scammed.
Research needs people. While it can be relatively easy to recruit college students for on-campus psychology experiments, finding older adults of a particular ethnicity and health status can be complicated and time-consuming. So in 2003, the Healthier Black Elders Center (organized through the IOG and the Michigan Center for Urban African American Aging Research) decided to create a database of African Americans willing to participate in noninvasive research. As of 2011, we are proud to have recruited 1,627 African Americans in the Detroit area age 55 or older.

How did we do it? “Education, education, education,” says Patricia Rencher, the community education coordinator who manages recruitment. “We’ve brought free educational forums to the elders in our community for years, so now they trust the value of research and want to become involved.” Healthier Black Elders Learning Forums provide expert speakers on relevant topics like diabetes, prostate cancer and heart disease.

The conversations include the importance of health research to improve the well-being of older adults. “Then we ask who might be interested in helping us,” says Patricia. “Little by little, we built a pool of volunteers.”

The biggest event for recruiting and celebrating research volunteers is the annual health reception hosted by the Healthier Black Elders Center. Upwards of 1,000 persons have attended this free all-day conference to have health screenings, meet service providers, listen to informative and inspirational speeches, exercise and enjoy a sit-down lunch. “This is how we thank all the folks we’ve recruited while trying to encourage others to join,” says Patricia. “It’s good fun but mostly we want people to learn how to stay healthy.”

Older African Americans have been underrepresented in health research, which has stymied our understanding of why they are at significantly higher risk of certain serious diseases. Hypertension, breast cancer, colon cancer and heart disease affect this group in greater numbers and with more serious outcomes than Caucasians. “We can’t end these disparities unless we can conduct the research,” Patricia says.

To learn more about how to help with research by joining the Participant Resource Pool, contact Patricia Rencher at 313-664-2626 or patrencher@wayne.edu.
LIFHE Lessons Show Unique Bond Across Generations

One recent project that used the Participant Resource Pool to help identify subjects was the Lifespan Investigation of Family, Health and Environment (LIFHE) study. The LIFHE team, lead by Dr. Lichtenberg and Dr. Lisa Ficker, interviewed 501 African Americans age 55 to 97 to understand senior activities, family relationships, attitudes, finances and health. Dr. Stewart Neufeld, a professor of mathematics and anthropology, oversaw questions related to finances, and Dr. Lysack contributed questions about mobility, home and environment. “Our survey was like taking a ‘snapshot’ of information about people’s lives to better understand their challenges and resources,” Dr. Ficker, LIFHE project director, says.

In urban areas, an estimated 9% of grandparents co-reside with their grandchildren, but little research has been done on the quality of these relationships. Almost 80% of LIFHE interviewees had grandchildren and 77 of them lived in the same household with a grandchild or great-grandchild. A majority of grandparents in the survey shared meals with grandchildren, talked to them on the phone and visited them often. Significant numbers of grandparents also reported receiving help with household chores and with shopping from their adult grandchildren.

LIFHE’s financial results showed 50% of seniors were somewhat satisfied with their income; but 28% were not at all satisfied. Seventy percent reported lower income than before they retired and 45% had reduced money spent on extras (such as clothing or recreation) in order to make ends meet. A full 54% of people interviewed live alone and almost 20% provide caregiving services for family members, friends and neighbors.

The data collected by the LIFHE team is now available to other researchers investigating the health, finances and social engagement of older African Americans. “This will be a great resource for many types of research,” Dr. Lichtenberg explains. “Between our large Participant Resource Pool and the detailed data collected from LIFHE, we hope to empower researchers to answer pivotal questions about the urban aging experience.”

For specific information about the LIFHE Project database, including available variables, contact Dr. Ficker at ljficker@wayne.edu or 313-664-2530.
In the past decade, community education events hosted by the IOG have exploded in number. Attendance at our signature events – the Art of Aging Successfully and the Issues in Aging professional conference – has more than doubled, plus we’ve added a new conference called Crossing Borders. “Last year, we educated 2,600 older adults and 3,700 professionals,” says Outreach Director Donna MacDonald. “When we saw the magnitude of the need, we had to step up and fill it.”

Crossing Borders, the newest IOG conference, pulls together professionals from different disciplines working on the same aging problems. Last year’s panelists discussed legal, financial, physical and emotional aspects of Alzheimer’s disease. This year, Parkinson’s disease is the topic. “The new format proved popular and got excellent evaluations,” says conference co-creator Teresa Bailey. Terri is also the IOG’s development officer tasked with raising money. In working with sponsors from different organizations, she realized they could benefit from sharing perspectives. “Ultimately it’s about better care for older adults and their families,” Terri says.

The real surprise has been the unbridled popularity of the IOG’s continuing education conferences, growing from four in 2005 to 66 in 2011. A sampling of CE topics shows why:

- Shedding Light on Medicaid: Making Ethical Choices

Above, Dr. Jean Gash, an advanced practice registered nurse, presents The Big Three: Incontinence, Infection & Instability, at an IOG CE conference on avoiding rehospitalization. Ninety professionals attended the August conference with partner At Home Health Services. Right, seniors participate in the annual Art of Aging Successfully Conference.
• Pain Management
• Intersex, Transgender, Bisexual, Lesbian and Gay Issues in Aging
• It’s Not about the Stuff: Harm Reduction for Hoarding
• Medical Marijuana
• Making Musical Connections with Alzheimer’s and Other Dementias

Programs provide 1 to 6 CE credits and are often free through the co-sponsoring organization. In addition, the IOG’s free Lunch ‘n Learn lectures and Learning Forums for older adults and caregivers continue to be well-attended. “We host them throughout Detroit for everyone’s convenience,” Donna says. Topics like diabetes, stroke prevention, and heart health are hyper-relevant to urban seniors. Targeted forums for men and Latino Americans also fill an important void.

IOG professor Dr. Kay Cresci heads the Art of Aging Successfully conference, now entering its 13th year. Developed by the Elder Advisors to Research, an advisory board of seniors, the conference celebrates all aspects of creativity. Attendees display art, quilting, sculpture, writings, ceramics and even doll houses. Interactive workshops are offered on topics like driving and laughter. Dr. Cresci, a registered nurse researching how older adults use computers and the internet, presented a popular workshop this year on social networking. “I want to help older adults access online information to improve their health,” Dr. Cresci says. To make computer use safe, easy and affordable, “we must involve seniors in the design and navigation of websites,” she adds. “We can’t dictate; we must partner.”
Education

GRADUATE STUDENT TRAINEE AWARDS

NATIONAL
Association for Gerontology in Higher Education, IOG student representative – Ana Daugherty
Carroll L. Estes prize from the Gerontological Society of America (GSA) – Elham Mahmoudi
Dissertation Fellowship Award from the Boston College Center for Retirement Research and the Social Security Administration – Elham Mahmoudi
Gerontological Society of America (GSA) Junior Scholar Award for Senior Service – Elham Mahmoudi

REGIONAL
Charles Matthews Award for pre-doctoral research in neuropsychology from the Midwest Neuropsychology Group, Chicago – Annalise Rahman

WAYNE STATE UNIVERSITY
Behavioral and Cognitive Neuroscience student representative – Ana Daugherty
Elizabeth Olson Award for best written paper in gerontology – Jinghua Huang, Ph.D.
Graduate Student President, IOG – Ana Daugherty
Norine Johnson Scholarship Award for excellence in scholarship, practicum training and clinical service – Daniel Paulson
Samuel M. Levin Economics Award for the year’s best paper on economics – Elham Mahmoudi

POSTER SESSION JURIED AWARDS
First Place Prize at the Graduate Poster Session, Department of Psychology – Andrew Bender
First Place Prize for research on changing racial and ethnic disparities at the WSU Inaugural Graduate Exhibition – Elham Mahmoudi

Institute of Gerontology 2010 Fall Poster Session Winners:
  First Place – Andrew Bender for A Combined Effect of Elevated Pulse Pressure and ApoE e4 Genotype on Recognition Memory
  Second Place – Elham Mahmoudi for Changing Racial/Ethnic Disparities in Access to Physician Care among Older Adults
  Third Place – Daniel Paulson for Depression, Cognitive Functioning and Mortality in an Old-Old Sample

TRAVEL AWARDS
IOG awards to present research at:
  The Association for Gerontology in Higher Education, Cincinnati – Elham Mahmoudi
  The International Neuropsychological Society Conference, Boston – Pamela May, Daniel Paulson
  The Society for Neuroscience, San Diego – Peng Yuan
  The Southern Economic Association, Atlanta – Jinghua Huang Ph.D.

WSU Dean of Students Award and IOG award to present research at the Dallas Aging and Cognition Conference – Andrew Bender, Ana Daugherty

PRE-DOCTORAL TRAINEES

These select Wayne State students work closely with IOG faculty to complete research projects related to aging and achieve their doctoral degrees. Congratulations to former pre-doctoral trainee Dr. Jinghua Huang on successfully defending her dissertation this spring.

Andrew Bender – Behavioral and Cognitive Neuroscience, Psychology
Cohen Carlisle – Behavioral and Cognitive Neuroscience, Psychology
Ana Daugherty – Behavioral and Cognitive Neuroscience, Psychology
John Dillon – Psychology
Jinghua (Jane) Huang, Ph.D. – Economics
Wei Lu – Economics

Elham Mahmoudi – Economics
Pamela May – Clinical Psychology
Daniel Paulson – Clinical Psychology
Annalise Rahman – Clinical Psychology
Yiqin Yang – Behavioral and Cognitive Neuroscience, Psychology
Peng Yuan – Behavioral and Cognitive Neuroscience, Psychology
Where Have All Our Trainees Gone?

Since 2001, the IOG has helped to train 221 students as they worked toward their doctorate by conducting research on aging related issues. Home departments include psychology, economics, nursing, anthropology, health care sciences, sociology, political science and engineering. IOG faculty members closely mentor the students, help to guide the research and are often advisors on their doctoral committees.

We are often asked where our trainees go after completing their time with us. Here are a few of the outstanding trainees, the year they trained with us, and their current positions:

**Dr. Jason Allaire (2001)**  
Associate Professor, Psychology  
North Carolina State University

**Dr. Karen Dunn (2001)**  
Associate Professor, Nursing  
Oakland University, MI

**Dr. Tantina Hong (2001)**  
Manager, Consumer and Market Research  
John Deere Worldwide, NC

**Dr. Benjamin Mast (2002)**  
Associate Professor, Psychology & Brain Sciences  
University of Louisville, KY

**Dr. Brian Yochim (2003)**  
Clinical Neuropsychologist  
Mental Illness Research, Education and Clinical Center  
Veterans Affairs Palo Alto Health System, CA

**Dr. Waverly Duck (2004)**  
Assistant Professor, Sociology  
University of Pittsburgh, PA

**Dr. Jacquelyn Taylor-Long (2004)**  
Assistant Professor  
Yale University School of Nursing, CT

**Dr. Xiao Xu (2004)**  
Assistant Professor (tenure track)  
Yale University School of Medicine, CT

**Felicia Bennett-Clark, M.A. (2007)**  
Mental Health Coordinator  
Southwest Solutions, Detroit, MI

**Dr. Mary Byrnes (2007)**  
Assistant Professor, Social Sciences  
Marygrove College, MI

**Dr. Lisa Ficker (2007)**  
Project Director, LIFHE  
Merrill Palmer Skillman Institute  
Wayne State University, MI

**Dr. Kristen Kennedy (2007)**  
Research Scientists  
University of Texas Center for Brain Health

**Dr. Amanda Schafer-Johnson (2007)**  
Clinical Psychologist  
Bay City, MI

**Dr. Yong Li (2007)**  
Pharmacy Research Scientist  
Competitive Health Analytics, Inc.  
Louisville, KY

**Dr. Omar Mahmood (2008)**  
Project Scientist, Psychiatry  
University of California at San Diego

**Dr. Stacey Schepens (2009)**  
Post Doctoral Trainee  
University of Michigan

**Dr. Brooke Schneider (2009)**  
Clinical Intern  
University of California at Los Angeles

**Dr. Nayoung Kim (2010)**  
Research Fellow  
Yonsei University, Korea

**Dr. Wassim Tarraf (2010)**  
Research Associate Faculty  
Institute of Gerontology  
Wayne State University, MI
New Research Grants

Developing a Meaningful Life: Social Reintegration of Service Members and Veterans with Spinal Cord Injury – Drs. Mark Luborsky and Cathy Lysack, Co-PIs. A 3-year, dual-site grant of $456,000 from the Department of Defense to study the social reintegration of American service members and veterans who suffered spinal cord injuries in Iraq and Afghanistan.

Multimodal Approach for Early Detection of Alzheimer’s Disease – Dr. Voyko Kavcic, PI. A grant of $122,224 from the Alzheimer’s Association to study several methods that might be effective in detecting early symptoms of Alzheimer’s disease.

The Hispanic Community Health Study /Study of Latinos – Dr. Hector González PI of the Neurocognitive Reading Center. This is a large, longitudinal study of 16,000 Latinos aged 18 – 74 funded by the National Heart, Lung and Blood Institute and the National Institute of Neurological Disease and Stroke. Dr. González receives $84,000 over two years to oversee the cognitive assessment of over 10,000 Latinos aged 45 and older.

Ongoing Research Grants

Michigan Center for Urban African American Aging Research (MCUAAAR) – Drs. Lichtenberg and James Jackson of the University of Michigan, Co-PIs. A $3.3 million 5-year extension to the nearly $6.5 million previously granted from the NIH to reduce the health disparities that exist between older African Americans and other ethnic groups through research, faculty mentoring and education.

Southeast Michigan Partners Against Cancer (SEMPAC) Dr. Teri Albrecht, Associate Center Director, Population Sciences, Karmanos Cancer Center, PI; Dr. Lichtenberg, Head of the Investigator Training Core. This $4 million grant from the National Cancer Institute renews the original Detroit Community Network Program (CNP) for an additional five years. SEMPAC’s goal is to reduce cancer rates among Detroit’s older, African American population through scholar training and networking with community organizations.

Neutral Correlates and Modifiers of Cognitive Aging – Dr. Naftali Raz, PI. The NIH awarded this $3 million, five-year grant to research the modifiers of cognitive aging from a neuroscience perspective.

Cognitive and Neural Consequences of Long-term Cortisol Exposure in Human Aging – Dr. Scott Moffat, PI. The NIH granted $1.5 million over four years to examine the effects of the stress hormone cortisol on brain function over time.

Epidemiology of Late-Life Depression and Ethnicity Research Study (ELLDERS) – Dr. González, PI. A three-year, $1.2 million dollar study funded by the National Institute of Mental Health to extrapolate the rates and types of depression among different ethnic groups, such as Mexican Americans, Puerto Ricans, Cubans, Asians, African Americans and non-Hispanic Whites living in the United States.

Training Students in Aging and Health – Dr. Lichtenberg, PI. An $834,000 extension from the NIH to the nearly $1.83 million previously granted to educate pre-doctoral and post-doctoral students through 2011 about aging and health.

Downsizing Possessions for Residential Moves in Later Life – Drs. Luborsky and Lysack, Co-PIs, in collaboration with Dr. David Ekerdt, PI, University of Kansas. The Detroit (IOG) site received $528,000 from the NIH for a three-year study of the significance, social function and management of material possessions as people downsize and move in later life.

Drug Insurance, Medication Adherence and Subsequent Outcomes Among Seniors – Dr. Gail Jensen Summers (IOG) and Dr. Xiao Xu (University of Michigan), Pls. A $370,000 grant from the Agency for Healthcare Research and Quality of the U.S. Department of Health and Human Services for a two-year analysis of prescription drug regimens and their effects on health and health care costs.

Seniors Count! – Dr. Thomas B. Jankowski, PI, in collaboration with Adult Well Being Services of Detroit. A two-year grant of $275,000 to gather, integrate and publish a compilation of the available demographic, economic, health and social data on older adults in Southeast Michigan. An additional research enhancement award of $25,000 was given to the project by the American House Foundation.

Integrating Mental Health into Occupational Therapy Practice with Older Adults – Drs. Lichtenberg and Lysack, Co-PIs. A $208,000 two-year grant from the Retirement Research Foundation to expand and evaluate current DVD-based training for home care professionals. The DVDs show health care workers how to intervene to alleviate mental health problems in older patients and will be expanded to include managers and trainers.

Retrospective Analysis of Pre-Medicare Aged Patients (50-59) with Chronic Diseases to Evaluate the Health and Economic Costs of Medication Non-Adherence – Dr. Summers, PI and Yong Li, Co-PI. A two-year award of $124,704 from Novartis Pharmaceutical Corporation to study the long-term effects on health and finances when patients do not take their prescribed medications.

IOG Community Engagement Program; A $50,000 five-year grant from the Mary Thompson Foundation to support the IOG’s educational outreach including its Research Colloquium and Professional Development Series for faculty, graduate students, professionals and community members. The series brings experts from around the country to lecture weekly throughout the school year on aging-related topics.
The IOG depends on the members of its Board of Visitors to connect our research and education with the community and to help us raise funds and awareness so our work can continue.

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Our corporate partners are as dedicated to the IOG mission as we are. They believe in translating knowledge to the community, in educating professionals, and in supporting research in vital areas that impact older adults’ lives.

Singh Senior Living / Waltonwood

Waltonwood Senior Living Facilities threw open their doors this year to conduct professional education for over 300 nurses, social workers and other health professionals working with older adults in the Detroit area. “Embracing Life for Older Adults – Mind, Body and Spirit” was the theme of the forums run through Waltonwood’s IOG partnership. In addition to educating professionals, Waltonwood worked closely with the IOG’s development team to post a series of informative articles on CBS Radio’s (WWJ-950 AM) online resource The Knowledge Center. This site reaches thousands of caregivers each month to enhance the reputation of Waltonwood and its partner, the IOG.

Odyssey Hospice / Gentiva Home Health

Collaboration was redefined through the integral partnership formed with Odyssey Hospice and Gentiva Home Health in 2011. The new corporation (merged in 2011), combined agencies that have long been dedicated to evidence-based programs and community and professional education. By partnering with the IOG, several educational programs were specifically developed by Odyssey professionals at the request of the IOG outreach team and in response to community need. As we work to debunk the myths of aging, teaming with Odyssey Hospice and Gentiva Home Health allows us to disseminate true, relevant and interesting information when and where it is most needed.
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We thank our benefactors deeply for their generosity and commitment to the mission of the Institute of Gerontology.

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“Act as if what you do makes a difference. It does.”
– William James
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