

LINKS: *Minority Research & Training*

Growing Older World-Wide

“Since it began in 1992, the Health and Retirement Study has provided a vast amount of information about the health and economic status of the aging U.S. population. It has also served as a template for similar studies now being conducted in other countries, making the study even more valuable in helping us to look at aging globally.”

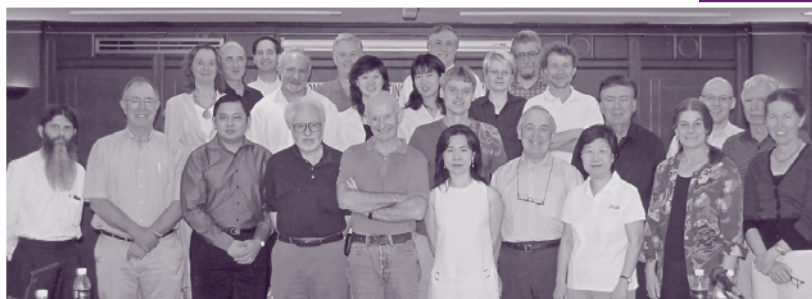
—Dr. Richard Hodes, Director,
National Institute on Aging (NIA)

The world’s population is getting older. More than ever, researchers are collaborating internationally to study what this aging means in terms of demography and economics. This year, the NIA Summer Institute on Aging Research invited international investigators to apply to the weeklong workshop, exemplifying NIA’s interest in supporting international research and “harmonizing” it with what is being done in the United States so that trends can be compared across nations and cultures.

The U.S. Health and Retirement Study or HRS is a case in point. The NIA and leading researchers and experts developed it, recognizing that with age comes a number of health and financial concerns. The study, conducted by the Institute for Social Research at the University of Michigan, is the first

Comparing Research Findings

Great Britain was the earliest to adapt HRS with its English Longitudinal Study on Ageing (ELSA). NIA supports ELSA with plans for a comprehensive comparison of the two countries’ findings. Already researchers have found in one analysis that white Americans ages 55 to 64 were less healthy than their British counterparts, despite the Americans’ higher overall income, more positive self-reports of health, and higher levels of health care spending.



In February 2007, members of health and retirement research teams from across the globe, including representation from HRS, CHRLS, ELSA, SHARE and KLoSA attended a data coordination conference in Thailand.

of its kind to examine the economics of aging over time, or longitudinally.

HRS follows more than 20,000 diverse participants. Investigators conduct interviews every 2 years regarding participants’ occupations and employment; economic circumstances, including social security and Medicare benefits; health and health care; cognition; living and housing arrangements; and demographics and family relationships. The purpose is to learn if and how

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International Studies

Researchers representing Sweden, Denmark, France, Belgium, the Netherlands, Germany, Switzerland, Austria, Spain, Italy, Greece, Israel, Ireland, the Czech Republic, and Poland united to form the Survey of Health, Ageing and Retirement in Europe (SHARE). Mexico has the Mexican Health and Aging Study. South Korea is in the second stage of its Korean Longitudinal Study on Aging (KLoSA). China, Thailand, Japan, and India are in various stages of developing their own studies.

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Diversity Converging: The 21st Annual Summer Institute on Aging Research

Since 1987, the National Institute on Aging's (NIA) annual Summer Institute on Aging Research has been a unique opportunity for early- and mid-career researchers to learn about designing successful research projects, applying for funding, and overcoming challenges of ethnic and minority aging research from the experts, namely NIA scientists and grantees. Traditionally, researchers travel from around the country to attend the week-long event. However, now, in its 21st year, the Institute has gone global. This year, in addition to 33 scientists from the United States, NIA invited two international researchers to attend the Institute held at the Aspen Wye River Conference Center in Queenstown, Maryland. The Institute was co-sponsored by the Alzheimer's Association, John A. Hartford Foundation, and American Academy of Nursing. NIH's John E. Fogarty International Center helped support the international researchers. Learn more about three of this year's attendees:

Dr. Sarwat Chaudhry



Dr. Sarwat Chaudhry did not originally set out for a career in aging research. As a budding general internist at the University of Chicago, she spent 3 years focused on patient care. However, it was through this work that she discovered what she considered to be a major flaw with the overall approach to medical care for older adults that would move her career in a new direction.

Most older people whom Chaudhry treated had multiple health conditions. These problems were not just co-morbid diseases but also co-morbid impairments, such as those in physical capacity, cognition, vision, hearing, and psychological status. "I began to realize that my patients' co-morbidities would inhibit their treatment and ability to take care of themselves. And yet we were only looking at

one, principal disease-based issue, like heart disease," Chaudhry explains. "I knew that we needed a different approach, but I didn't even know what questions to ask to create this alternative way to care for patients with multiple chronic conditions."

In search of the right questions to solve this problem, Chaudhry was accepted into the Robert Wood Johnson (RWJ) Clinical Scholars Program at Yale University. Chaudhry gained research skills through the program's combination of coursework and hands-on research and patient care. And, while it facilitated her start as an investigator, perhaps the largest benefit to being a RWJ Clinical Scholar was meeting her mentor Dr. Thomas Gill, Professor of Internal Medicine, Geriatrics, at Yale. Gill helped Chaudhry refine her skills and define her area of interest.

"I feel like my success is his success," says Chaudhry of Gill. "He takes such an interest in not only my research projects but my entire career development. It has been great to learn from someone so successful and experienced. He tells me, 'go after this funding, here's how, and here are some examples of applications.' When I work with him, it's working toward something."

Chaudhry continues to look for ways to strengthen and further develop her research on the effects of co-morbidities on functional outcomes among older people, with her focus on heart failure patients. While at NIA's Summer Institute, she was particularly inspired by Dr. Linda Fried's presentation on the Experience Corp, a study that found older adults to experience health benefits from volunteering at elementary schools. "I'm already thinking about how to apply what Dr. Fried said as an intervention, modifying it to work with heart failure patients."

Chaudhry balances her professional career with a family. She is married with two children.

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Dr. Florence Keane

For years, Dr. Florence Keane lived in the hardnosed business world. She immigrated to the United States from Jamaica after high school, in pursuit of more opportunities and a higher education. After receiving her M.B.A from St. John's University, she became an account executive for a major company. Nearly 15 years later, Keane's priorities shifted. "I tried to think of things that are needed," says Keane. "I asked myself, 'what could I do that would be more meaningful?'"

Keane decided to go back to school to study nursing. She eagerly embraced the chance to personally touch lives. "I realized that my love for people made me want to improve everyone's life I encountered," she explains. While earning her doctorate degree in nursing at Florida Atlantic University, Keane met Dr. Ruth Tappen, a professor at the nursing school. Tappen invited Keane to join her investigation into cultural bias as it relates to Alzheimer's research. Already having an interest in cultural differences from her upbringing in a developing country, Keane enthusiastically accepted the offer. Under Tappen's guidance, Keane learned valuable research skills and began to form her own research questions, building on her academic and personal experiences.

Keane now examines the differences in cognitive impairment between African Americans and Afro-Caribbean American elders, two groups that often are lumped together in research. "There are big, big cultural distinctions between Afro-Caribbean and African American populations, yet often times researchers make assumptions about one based on the other," says Keane. "There are a lot of stereotypes out there." Keane believes that she brings a unique perspective to her work because she knows first hand how great the differences can be—especially when they relate to health.

Keane encourages her students to view research as a "people-process." Keane has this advice, "We need to treat everyone equally but also remember that everyone is different. Before a researcher becomes successful, she has to understand the people she is studying."

Keane continues to further develop her interest in aging research and was delighted to be part of NIA's 2007 Summer Institute. She enjoyed mingling with researchers from all over the world—people with common interests; people with struggles and successes similar to her own. Through these interactions, Keane has strengthened her research ideas for how to investigate the cognitive problems among African and Afro-Caribbean Americans. She has benefited from other investigators "lessons learned" about funding opportunities. "It was a wonderful experience," Keane says. "When I came back, I had a chance to think about my plans based on where the developments in scientific aging research are headed. It was interesting to hear about what has been done and where the future is leading."

When Keane reflects back on her career change, she could not be happier with her decision, "Minority aging research, teaching and nursing—these are three things that I am really passionate about."

Dr. Brian Yochim

Throughout his career, Dr. Brian Yochim has sought to enrich the lives of older people. As a practicing clinical neuropsychologist, researcher,



and an assistant professor at the University of Colorado at Colorado Springs (UCCS), he is in a unique position to do just that. Yochim's professional roles are synergistic: he can observe problems with current clinical methods for testing and predicting dementia as a neuropsychologist; identify and study alternative, possibly better methods as a researcher; apply them to the clinical setting; and train, budding psychologists in these new methods.

Yochim's interest in psychology developed while attending Truman State University in Missouri. "I was interested in studying why people do the things they do," Yochim says. "And, I wanted to understand from a scientific standpoint." This interest led him to get advanced degrees, a master's and doctorate in clinical psychology, at Wayne State University in Detroit. Yochim decided to focus his clinical psychology

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Dr. Keith Whitfield: *Then and Now*

Dr. Keith Whitfield stepped behind the speaker's podium and peered out at the 2007 NIA Summer Institute class. Fifteen years earlier, he was one of those attendees.

Even before setting foot on a college campus, Whitfield knew he wanted to major in psychology. "It matched my interest in observing behavior and understanding perceptions of the world," he explains. Moving fast forward from getting his bachelor's degree at College of Santa Fe to master's and doctorate degrees at Texas Tech University (Lubbock), Whitfield saw his career path set. But it was during this time that a personal loss would shift his focus from general psychology to the study of lifespan development. "[It was my grandfather's passing] that stimulated my interest in aging research," shares Whitfield.



Dr. Keith Whitfield

Whitfield then sought out mentors who could help him find his place in aging research. Looking back he says, "Each has contributed different and unique dimensions to my growth. They have provided advice, opportunities, or connections with others that have been invaluable to the success I have experienced in my career."

One of his earlier mentors was Dr. Jeffrey Elias, a professor of psychology at Texas Tech, who would later become an NIA scientist in the Behavioral and Social Research Program. Elias helped cultivate Whitfield's early interest in psychology of aging. Elias also advised him to seek out a second mentor, Dr. Norman Anderson, who at the time was a professor at Duke University and the director of the

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OLDER WORLD-WIDE (continued from page 1)

people prepare for economic and health requirements of advancing age and how they fare in retirement.

In March of this year, NIA published *Growing Older in America* (available online at www.nia.nih.gov/ResearchInformation/HRS.htm). The booklet presents a comprehensive overview of the HRS and is divided into four themes: Health, Work & Retirement, Income & Wealth, and Family Characteristics & Intergenerational Transfers. Dr. Richard Suzman, Director of NIA's Behavioral and Social Research Program leads NIA's efforts on the study. He highlights a few of the findings:

- ❖ The impact of an unexpected health event, such as the onset of a major disease or an accident, can reduce a family's wealth by 10 to 20 percent over a short period of time. This reduction is not just from out-of-pocket costs, but loss of earnings. The event also has long-term effects. Frequently, the person who is

sick and/or the caregiver withdraws from the labor force following the unexpected health event.

- ❖ Baby boomers are expecting to work longer and retire at later ages. This may foretell a reversal in the century-long trend toward earlier retirement.
- ❖ Variations in wealth among older Americans are even more striking than variations in income. People with the same total income over their lifetime show huge variation in how much they save versus how much they spend.
- ❖ Self-reported health and actual health can be very different. Researchers are developing a way to calibrate and adjust for subjective assessments by asking participants to read a vignette about aspects of someone's health (e.g. pain) and then rate that person's health.

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A Unique Twist on Enhancing Health and Longevity

Who says learning how to be healthy can't be both informative and entertaining? Certainly not members of the Healthier Black Elders Center (HBEC). For the fifth year, the HBEC has hosted its annual health reception for Detroit, Michigan's African American senior community that feels more like a festive retreat than a traditional educational meeting.

"We carefully balance music, exercise, inspiring and educational presentations, and a delicious yet nutritious lunch," explains Dr. Olivia Washington, HBEC Director and Professor at Wayne State University's Institute of Gerontology and College of Nursing. "We give consideration to how best to reach our elders. What is important to them? What do they care about? By providing the music and foods they enjoy in a venue that has meaning for them, we send a potent message: We care enough to partner with you to enhance your health and your future."

A key goal of the reception is to promote good health. "We do this by education, health screenings, and preventative care," says Karen Daniels-Tucker, HBEC Community Outreach Specialist. This year, more than 20 health and wellness exhibitors provided attendees with many free services including blood pressure, cholesterol, and diabetes screening as well as cancer and HIV education. Surveys support the success of these efforts. After this year's event, 91 percent of the participants agreed that the health screenings were useful and that the event had an influence on their health habits.

Washington stresses that nothing is arbitrary in the design or execution of this reception. "We can't expect elders to listen to us if we don't take the time to connect with them." By bringing pizzazz to health education, HBEC does more than teach the participants about good health care. It helps to create an important connection. People laugh, dance, sing, joke, and exercise. "Most of all, long-held attitudes toward medicine and preventive care change—for the better," explains Dr. Letha Chandhiha, Community Core faculty member at the University of Michigan.

"African Americans have traditionally been distrustful of the medical community. Explanations vary about the cause, but the result is the same,"

notes Washington. "Decades of mistrust in traditional medicine have taken their toll. HBEC works to overcome this fear and suspicion and win the trust of Detroit's elders so they will adhere to its message of good health, a message that is long overdue."

The HBEC is part of Wayne State University and University of Michigan's Michigan Center for Urban African American Aging Research (MCUAAAR), one of the NIA-funded Resource Centers for Minority Aging Research (RCMAR). MCUAAAR was developed to better understand health disparities affecting African Americans and come up with solutions through research. It became clear to MCUAAAR-HBEC staff that community involvement, specifically from the metropolitan Detroit area, was essential for the success of any of their health promotion and disease/disability prevention efforts targeted to minority elders.

Thinking innovatively about how to get the community's attention and interest, the HBEC team developed this annual community event focused on health education and awareness. "This is the culmination of years working to build effective liaisons with community agencies, elders and their families in Detroit," reflects Dr. James Jackson, Daniel Katz Distinguished University Professor of Psychology and Director of Institute for Social Research at the University of Michigan and Co-Principal Investigator of the MCUAAAR.

Hard work, a stellar reputation for honest and fair treatment, and a quality program that delivers what it promises became the recipe that helped the HBEC reception grow from 400 people 5 years ago to the record-breaking nearly 1,000 participants this year. "Each one of these people goes back to their neighborhood and spreads the word to friends and family," said Cheryl Deep, head of media relations at Wayne State University's Institute of Gerontology.



Health screening at annual reception

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Summer Institute 2007





The HRS is maintained as a research resource for a variety of disciplines. NIA makes the HRS data available to investigators to use in their own research. It is online at <http://hrsonline.isr.umich.edu/>. To date, nearly 7,000 researchers have accessed the HRS data. The number of published studies continues to grow as the scientific community becomes more aware of the richness and availability of the data source. The HRS has sparked an international awareness of health and retirement, leading a number of countries to develop their own studies.

Harmonizing health and retirement research across the world is an important part of this international effort. Creating some standardization across these studies will help researchers to compare their findings.

In the interest of understanding the research efforts of other countries and providing opportunities for international investigators to learn from American research, NIA invited Dr. Yan Shen, Associate Professor, China Center for Economic Research (CCER), Peking University to participate in the 2007 Summer Institute for Aging Research. Dr. Shen is part of the team conducting the China Health and Retirement Longitudinal Study (CHRLS). Her attention was first called to health and retirement research when NIA's Suzman visited China in 2006 and spoke with CCER staff about aging; he also provided a sense of how China could conduct a study similar to the American HRS.

Suzman says he has been impressed by China's research team and was excited to have a member attend the Summer Institute, "Connecting the many splintered scientific communities is important as we strive to open up the data [from different health and retirement studies]. This is a global effort and combining scientific brainpower and ingenuity allows researchers from other countries to make contributions to the global effort that ends up benefiting the USA. I'm glad that the Summer Institute has been able to incorporate global aging as an international phenomenon and NIA's international role."

Shen also recognizes the importance of coordinating CHRLS with existing health and retirement studies—that's why she applied for the 2007 NIA Summer Institute. For Shen, a highlight of the Institute was learning about fellow attendees' research topics and methods for studying aging. "The cross disciplinary focus of the Institute was most remarkable. When I think of aging, I focus on thinking of the economic side. I enjoyed speaking to researchers and getting their feedback. It helps provide a better understanding on China's aging problem."

According to Shen, the economic burden of aging is growing rapidly in China, a country that already has more elderly than any country in the world. "In 2003, China was not discussing aging extensively, but now we realize that the population is getting old fast.

Dr. Siddhivinayak Hirve

Dr. Siddhivinayak Hirve, one of the international researchers who attended the Summer Institute this year, is the Director of the Vadu Rural Health Program at the King Edward Memorial Hospital in Pune, India. One of his principal projects is the Study on Global Aging (SAGE), which was modeled after the HRS, ELSA, and SHARE and is supported by the World Health Organization and the INDEPTH Network. Through SAGE, information is collected over time from 500 adults living in western India about their employment, work benefits, family structure, health status and behaviors, and subjective well-being and quality of life. A new addition to SAGE is an investigation of elder mistreatment, including nature and consequences of mistreatment, risk, and coping mechanisms. Reflecting on his time at the Summer Institute and the benefit to his research, Hirve says, "The balance between knowledge—the scientific content of the latest in aging research—and skills acquisition, such as familiarization to the NIH/NIA grant making mechanisms, was outstanding... I found almost all aspects of the Summer Institute relevant to me and my setup and I have come back home more eager to delve deeper into aging research."

By 2050, the number of people in China 60 years and older will be more than the total population in the United States." Shen explains that the elderly support ratio (the number of people in the workforce, ages 25 to 64, compared to the number of people age 64 and

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older) was nearly 13 in year 2000. By 2050 it will only be about 2.1.

A predominant reason for China's aging challenges is its one-child policy, developed when China's population was burgeoning. Now, a typical family in China has four grandparents, two parents, and only one child. Another reason for China's aging issue, according to Shen, is mobility: the Chinese population is no longer governed by a strict Hukou system, in which people had to register their residency and were not allowed to find work elsewhere without permission from the government. Increased mobility is also attributed to the influence of American culture on Chinese youth, who are more likely to leave home and their aging parents in pursuit of different opportunities.

Shen says that China has plans to pretest CHRLS in September 2007 and do a pilot program in 2008. Beginning in 2009, the team hopes to start analyzing preliminary data. "I find [CHRLS] fascinating. We expect to work on it for years and years. The issues will only receive more and more attention," concludes Shen.

So what does the future of world-wide health and retirement studies hold? According to Suzman, "Comparative research is going to grow enormously. Researchers will move from observational data collection to developing wide-range interventions to improve health and well-being."



Dr. Suzman, front row, 5th from left and Dr. Shen, 2nd row from front, 1st from left.

Another Resource

Why Population Aging Matters: A Global Perspective served as the background for the March 2007 Summit on Global Aging, hosted by the State Department with the collaboration of the NIA. Available online at <http://www.nia.nih.gov/ResearchInformation/ExtramuralPrograms/BehavioralAndSocialResearch>.

LET US HEAR FROM YOU!

We are always interested in hearing from program faculty, alumni, and students. Please contact us and let us know where you are and what you are doing.

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research on older adults because, “they have many more complexities than other adults,” he says.

Yochim attributes his interest in aging to several people, including Dr. Peter Lichtenberg, Professor and Director of the Institute of Gerontology at Wayne State University, Dr. Sara Qualls, Professor at UCCS, and his grandmother Jean Kuehn. From fostering his research skills to helping him with a key job interview, Lichtenberg has supported Yochim throughout his research career. “He’s been my mentor since I was in school,” Yochim says. “He’s always available when I have questions.” From Qualls, Yochim’s other mentor, he learned how to juggle his many different roles. “She helped me get through my first year by showing me how to manage my time and by working with me to find a balance between teaching, research, and service. She continues to help me develop as an assistant professor.”

One of Yochim’s current areas of research focus is on neuropsychological predictors of instrumental activities of daily living (IADLs). IADLs are activities of independent living and include driving,

managing money, and preparing meals. His research approach is two pronged: first, identify predictors for a person’s ability to perform IADLs, such as if the person has depression, and, second, to determine which neuropsychological tests are the best to measure these predictors. “We still have limited knowledge on the ability of these tests to predict IADL performance,” explains Yochim. “I want to know which ones are the best to use in the assessment of dementia, which ones predict dementia, and which ones relate to IADL.”

As Yochim examines these research questions, he also seeks opportunities to learn more about the other critical issues facing older adults today. That is what brought him to the NIA’s 2007 Summer Institute. Yochim appreciated the practical advice, research presentations, and the networking available during the week-long program. “It was great just hearing about all the exciting areas of research these days in aging. It was also great to have all the professionals come to talk to us and also have time to get to know the people attending who are at a similar stage in their research careers. Now I have colleagues at other institutions.”

ENHANCING HEALTH & LONGEVITY (continued from page 5)

Many of the attendees agree to enroll in the HBEC Participant Resource Pool. There are nearly 700 African American seniors currently in the growing pool, making it a coveted resource for research on aging. “This is a valuable outcome from an academic standpoint,” says Washington. “If we can recruit and retain research participants, important research can move toward finding results to improve African American health.”

In addition to its many community based leaders who speak at the reception each year, the Center also benefits from relationships with national leaders such as Dr. J Taylor Harden, NIA’s Assistant to the Director for Special Populations. Harden gave the reception’s 2006 keynote address entitled, “Enhancing Our Aging Mosaic.” This year, Dr. Sidney M. Stahl, RCMAR program officer and a

branch chief at the NIA’s Behavioral and Social Research Program delivered one of the two keynote addresses. Dr. Leslie Cooper, a Public Health Service Captain at the NIH’s National Cancer Institute, delivered the second address.

Stahl was excited to have the opportunity to be part of the reception, “It’s not often that the right message is simply and clearly connected to exactly the right audience,” he says.

“This event makes that happen in a fun and caring atmosphere. I’ve never seen anything like it.”

Dr. Peter Lichtenberg, Professor and Director of the Institute of Gerontology at Wayne State University, reflects on one reason for the reception’s tremendous success, “It’s friendlier and more engaging than sitting in a lecture. The participants love the camaraderie and the music and all the while they’re learning new information and attitudes about health.”



Exercising at annual reception

university's program on Health, Behavior, and Aging in Black Americans and is currently CEO of the American Psychological Association. Years later, Whitfield would follow in Anderson's footsteps by joining the faculty at Duke.

Another of Whitfield's mentors is Dr. James Jackson, the Daniel Katz Distinguished University Professor of Psychology and Director of the Institute for Social Research at the University of Michigan. Jackson, who is Co-Principal Investigator of the NIA-funded Michigan Center for Urban African American Aging Research and has served on the Board of Scientific Counselors of the NIA, provided Whitfield several professional growth opportunities during their mentoring relationship. Jackson invited Whitfield to write a chapter for his book, *Aging in Black America*, and added questions about cognition to Jackson's National Survey of American Life so that Whitfield could have access to data in a nationally representative sample of African Americans.

Whitfield eventually found himself as a post doc at the University of Colorado's Institute for Behavior Genetics. It was there that one of his colleagues, Dr. Linda Burton, an associate professor of human development and family studies, pointed Whitfield to NIA's Summer Institute. "I researched the program and found it offered a wonderful grounding on various aspects of aging, both behavioral and biological. I knew I had to attend," Whitfield recalls. And so, in 1992 he did. He sat among emerging researchers with similar interests and eagerly listened to presentations by veteran investigators who shared their research findings, successes, and advice. "I think the one-on-one connection, interacting with leaders in the field as well as researchers on my level were my most significant experiences during the retreat," he says.

Now, 15 years later, Whitfield has become a leading scientist on minority aging sharing his presentation "Cultural Sensitivity Demystified: Subject Recruitment and Retention—Concepts and Theory" at NIA's Summer Institute. The 2007 participants were especially interested in hearing how to work with diverse study participants. Whitfield started with the hard fact that there's no one method for cultural sensitivity that will apply to everyone. Instead of looking for a universal approach, he told the researchers to start with this phrase in mind: It's

not you; it's me. Whitfield explains, "being culturally sensitive means being aware that you and your environment are different from the participant and, as the researcher, you need to adapt for the participant instead of expecting the person to adapt for you. The participant is already parked in the researcher's parking lot, sitting in the researcher's office and out of his/her comfort zone. It's your (the researcher's) turf, not his/hers. It's not you, it's me." Around these five simple words, Whitfield has developed specific, effective methods for involving minority participants in research. "Culture is a continuum, so being sensitive is a moving target. We need to try to read and understand where [participants are coming] from. For each person, we need to re-conceptualize our thinking, ask the right questions—form dynamic relationships," says Whitfield.

His lecture on recruitment and retention of minority research participants was particularly timely. He spoke from years of experience, including the recruitment and retention techniques he has used in his Baltimore Study of Black Aging and for the Carolina African American Twin Study of Aging. "If you think it's hard to recruit African Americans for research studies," he laughs, "Try finding twins."

Whitfield believes that the Summer Institute continues to be a positive experience for emerging researchers. "I've done presentations now five or six times, seeing new, bright people asking questions about aging. It's what the field needs to continually have an influence—those kinds of minds," he says. "That's one of the things the Institute does—it brings them together."

Whitfield's current research is looking at genetic issues as well as the role of environmental and cultural factors on the aging process, particularly among African Americans. He has directed several multi-million dollar projects funded by NIA and authored more than 60 articles and 23 books and chapters. He is the past chair of the Gerontological Society of America's Task Force on Minority Aging and is a member of many other organizations, boards, and committees, including serving on the NIA Board of Scientific Counselors, as his mentor Jackson did in the past. In short, the emerging researcher has become a veteran and now is in the role of professor, advisor, and mentor.

LINKS: MINORITY RESEARCH & TRAINING

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Announcing 2008 Summer Institute on Aging Research Application Deadline: March 7, 2008

Applications are now available for the National Institute on Aging's (NIA) 2008 Summer Institute on Aging Research. This weeklong annual workshop for investigators new to aging research, focuses on current issues, research methodologies, and funding opportunities. It is one of the premier short-term training Institutes for new investigators in aging research. The program includes consultations on the development of research interests. The 2008 Summer Institute will be held July 12 – 18 in Queenstown, MD. Support is available for travel and living expenses. Applications are due March 7, 2008. To increase the diversity of participants, minority investigators are strongly encouraged to apply. Applicants must be U.S. citizens, non-citizen nationals or permanent residents.

For additional information and an application form, contact Dr. J Taylor Harden at 301-496-0765 or Taylor_Harden@nih.gov.

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