

# Perspectives on Retirement

This series explores the diversity of responses and levels of enthusiasm for retirement, especially by those who have invested extraordinary effort in and devotion to their careers. We're interested in how people adapt to this next stage in their lives. Each issue of *Old News* features interviews with retirees—some early in that process or even on the cusp of it, and others who are many years or even decades into their retirement. We are trying to assemble a set of varied experiences, but ultimately we will go where the trail takes us. If you know of a story we can tell (including your own), please let us know. If you have not yet retired, but are thinking about it, share your thoughts with us as well.

## Big Boots to Fill

### Reflections on a Half Century at the University of Minnesota



*Marilyn Eells 1967 high school graduation picture*

When Marilyn Eells began working at the University of Minnesota in 1966, microfilming student patient records for Boynton Health Service, she was just 16 years old. She thought the gig would last nine months, until she graduated from Roosevelt High School. She was participating in the senior work program, which allowed students to take classes half the day and work the other half, thereby earning credits *and* cash. "I was young for my grade because I had started school at age four," Eells says. "I was always the youngest at everything, so now it's kind of strange to be one of the oldest." Strange, too, to be contemplating retirement from an institution she has served for a half century. "For 49 years, I've come to the same place, literally going in the door on that side of the street or this side," she says, gesturing to Church Street, which separates Boynton Health Service from the Mayo Building. "It will be different to not have this same routine."

### Small Town Girl Takes on the Big City

Born in 1949 in the small town of Paynesville, Minnesota, between St. Cloud and Wilmar, Eells still remembers the shock of moving to Minneapolis when she was nine. Her brother, eleven and a half years older, was off at college. Her father felt he could get a better paying job in the Twin Cities, and he found what was supposed to be a permanent position with the City of Minneapolis. As it turned out, the "permanent" job lasted less than a year, but the move had already been made, and the family stayed put, even though Eells's father changed jobs frequently after that.

Having to leave friends behind and make all new ones in the crowded city felt like an unfair challenge to the young Eells, but she came to like Minneapolis by the time she reached high-school age. And the student job at the University was appealing for many reasons. "My parents couldn't afford to send me to college, but I knew if I worked at the University, I could take classes as an employee," she says. So, when the University offered her the opportunity to stay on after graduation, she gladly accepted.

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Eells leapt quickly from that first position to one in the School of Public Health's Division of Environmental Health in Boynton and then to another in their office across the street in the Mayo Building. "To pick up our mail, I had to go up to the thirteenth floor, where the Dean's Office was, and it became my goal to work there. Sure enough, something opened up." Not just something, but senior secretary. "I worked for four different deans," Eells says. "I started one month before Gaylord Anderson retired." Anderson was the first dean of the School of Public Health. Eells then worked with Lee Stauffer, Edith Layasmeyer, and finally, Bob Kane.

### Long-Time, Long-Term Care Colleagues

Eells has now worked with Kane for thirty years. When he was appointed Minnesota Chair in Long-Term Care and Aging, Marilyn agreed to follow him to the Division of Health Policy and Management's Center on Aging as his executive assistant. Eells recalls Kane saying, "I know you have loyalties to the Dean's Office, but if you would be interested, I would love to have you move with me." Now, Eells has worked directly with Kane longer than any other individual. "I know what he is expecting, and he knows what he can count on me to do. I'm trying to write a procedures manual by the end of the year to describe my position, but I've never recorded what I do before. I don't think of these things as job duties."

About Eells's impending departure, Kane says, "What do you do when you lose a partner who has always had your back? We've worked together so long it's like the old joke about the prisoners who told jokes by numbers. Her high skill set is matched only by her standards for the quality of the work. She leaves big boots to fill."

In addition to overseeing the functioning of the entire Center on Aging office, Eells also serves as technical editor for the Minnesota Evidence-based Practice Center, a position she has held for the past thirteen years. In her editing role, she recommends changes to clarify meaning as well as formatting the documents. Her acumen at this has earned her the nickname "Eagle Eye," and she is often asked by other staff and students to review materials before submission. She admits that handling the many and varied facets of her multiple positions can be hectic: "It's not something I could have just walked into, but over all these years I've grown into being able to manage the whole process and get things done. I feel good about the products that go out of this office."

### The Times, They Are A Changin'

In her time at the University, Eells has accumulated a series of awards and recognitions; she received the first School of Public Health Award in 1983 and an Outstanding Achievement Award in 1989. She's also borne witness to enormous change, institutionally, culturally, and procedurally—some of it humorous. For example, young people would be stymied by some of the arcane supplies and methods of those earlier years, such as the manual correction of typos with correction fluid. "It caused a real gaffe when I worked for Robert Veninga in the

Dean's Office," Eells says. "He was promoted from Assistant Professor to Associate Professor, but one day I accidentally typed 'Assistant.' I whited out the last six letters of Assistant, planning to fix it after the white-out dried." But Eells forgot. "His title on that letter—'Ass Professor Veninga'—wasn't very appropriate," she says. "He was understanding, but I was totally embarrassed." But as much as things change, they stay the same. "In 1970 the School of Public Health's goal was to have its own building. That was forty-five years ago, and it still hasn't happened," she says.

### Seeing a Different Side

The most important thing Eells will take away from her time at the University will be her relationships with her coworkers, Kane in particular. "He was a huge help when I was dealing with my mom and her health issues. He came and sat with my mom and me in the nursing home when she was dying from cancer. Not a lot of people see that side of him."

Eells circles back to the things she learned from navigating the long-term care system on her mother's behalf as she thinks about her own future. "Not having any kids to take care of me, I think about where would I want to live if I can't live on my own. Probably, I am thinking about it more than I would if I hadn't worked here, and certainly I have insights into things I wouldn't otherwise. I don't have all the answers, but at least I have a sense of the resources available—I just need to ask the right questions of the right people."

### There Are All Kinds of Families in the World

Though Eells has never married or had children, she has close relationships with her two nephews and has been a host parent to international exchange students several times over. She remains in touch with each of the four students she hosted. Eells got involved with the exchange program when she provided a phone reference for a friend who wanted to host. Over the course of the phone call, Eells told the program representative that hosting sounded like something she'd like



Marilyn Eells in Bucharth Gardens, Victoria, BC, on a recent vacation.

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to do, but that she probably wasn't eligible as an unmarried person with no kids. "The representative said, 'There are all kinds of families in this world. You can be a single parent to an exchange student just like you could to your own child.' Next thing I knew, Luiz was on his way from Brazil. I remember coming into work saying, 'I'm going to be a mom for a year!'"

As the year came to an end, Eells decided to host again. "Luiz and I looked through the packets together, and he weighed in on who he thought would be the best fit. Erik came from The Netherlands the next year. He was the youngest, only 16, and he had never been away from home before. It was an adjustment for him. He had the hardest time." Then came Alex, from Germany, who was interested in singing and theater. Her previous host sons had been into soccer and sports. School activities became old hat for Eells. The last student she hosted, Eva, came with a new set of challenges. "She was a very pretty tall blonde from Iceland," Eells reminisces. "Very popular, stood out in a crowd. I had to have all kinds of new rules."

Each round of hosting meant learning on the go. "It was work, it was time consuming, but it was a wonderful experience." After Eva returned home, Eells and a friend decided to visit the three European students she had hosted. Since then she has seen Alex a few times when he traveled back to the U.S., Erik following a transatlantic cruise Eells took two years ago, Eva on her return home from that trip, and also Luiz, who visited for ten days in September of 2015. "He's living in Austin, Texas, now, so hopefully I'll see him more often."

### The Day When I Leave

Eells loves travel and is intending to do so much more in the years ahead. One of her past goals was to visit all fifty states, which she achieved, along with three trips to Europe, several cruises, and many trips with her two nephews, her exchange students, and friends. But there's much more she wants to see. The death of a family member two years ago spurred her desire to retire now, "while I'm still healthy and able to enjoy life and spend time with family and friends, participate in activities I enjoy, meet new people, and develop some new interests." For example, she's hoping to return to an array of sewing and craft projects that have gone by the wayside, and thinking about the kinds of community education classes and volunteer work she'll finally have time to pursue.

One of Eells's hopes is to introduce the students she's hosted to one another. "Although they all seem like 'my kids,' they don't know each other. My retirement dream would be that I could afford to bring all of them and their families and me and my family together for a big reunion—probably somewhere that none of us has ever been before—and just have one big international party."

Eells intends to retire on the first Wednesday in January. Her first trip, a visit to a friend in South Carolina, will take place later that same month. "I am excited about retirement," she says. "I know it's important to be flexible and have a positive outlook. So I don't think 'worried' is the word. Apprehension, I suppose—what's it going to be like? Am I going to wish I'd made a different decision? The hardest part is going to be the day I leave."

## She's Looked at Life from Both Sides Now— "It Worked Out Pretty Well"

Ruth Stryker-Gordon literally wrote the book on long-term care administration. She was the midwife to the birth of the field. She developed and ran the administrator training program in the School of Public Health from 1974 to 1989. Now, she finds herself a caregiver.

### A Healthcare Reformer Looks Back

"I wouldn't have chosen it," Stryker-Gordon says, "if I had had more choices." She is speaking of nursing, the field in which she worked for over four decades. When she graduated from high school in 1941, the careers accessible to women were limited—"secretary, teacher, nurse, wife," Stryker-Gordon says.

But "wife" was not a stand-alone option for Stryker-Gordon, who was born in 1925 in St. Paul, Minnesota. Her father was a businessman, her mother a Wellesley dropout who later worked as a columnist for a St. Paul newspaper. "She only stayed at Wellesley one year; she hated it there, but then, she hated everything. She was not the nicest mother, but she did get jobs," Stryker-Gordon says.

Stryker-Gordon's father died when she was eight, during the Depression. "My mother always said I had to have the ability to earn a living. She was hell bent on that." Not only did Stryker-Gordon earn her living, but she pioneered important changes to nursing education and long-term care, too. Though her degree was in nursing and public health, her true calling proved to be shaping the curriculum used in training healthcare professionals, especially nursing home directors. "Nursing worked out pretty well in the end," Stryker-Gordon concedes. Indeed, it did. She received a Distinguished Alumni award from the School of Nursing in 2009.

### Learning to Earn a Living

In 1943, Stryker-Gordon enrolled in the nursing program at the University of Minnesota. After graduation, she worked a succession of jobs—for the Minnesota State Health Department's tuberculosis division, as a school nurse, and at St. Barnabas Hospital, where she ultimately became the director of nursing education and method improvement.

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She came by her interest in writing from many sources. Like Stryker-Gordon's mother, her uncle, James Gray, also wrote for the St. Paul newspaper—he was a book critic. This early exposure to writing left its mark on Stryker-Gordon. Her uncle also wrote *The University of Minnesota: 1851–1951* for the University's first centennial celebration, as well as *Education for Nursing: The History of the School of Nursing*, which he dedicated to Stryker-Gordon. "I always thought writing looked like such fun," she says.

In 1960 she won a contest sponsored by the *American Journal of Nursing* and judged by John Ciardi, a well-known poet published in *The New Yorker*. Stryker-Gordon's winning essay sent her to the Bread Loaf Writer's Conference, where she played tennis with Howard Nemerov, the U.S. Poet Laureate at the time. "He was a bit crazy," she says, "and you know what I'm talking about. All writers are a bit crazy. He was reading one of his poems, and he said, 'I looked down at my spoon, and there was my eyeball.'" While at Bread Loaf, Stryker-Gordon mentioned to Ciardi that she had an idea for a book, a guide for nurses returning to nursing after time away from the field to raise families and tend to other obligations. Ciardi told her to aim high, and query only the top publishers in the field. She did. The response? An invitation from W.B. Saunders to "just go ahead and write it, of course." And so, *Back to Nursing* was published in 1971.

### A Real Void – The Beginnings of Modern Long-Term Care

Stryker-Gordon's second book stemmed from her partnership with Paul Ellwood, medical director of the Sister Kenny Institute, where she worked as director of Nursing Education and Publications in 1965. Ellwood wanted her help with his efforts to introduce rehabilitation to nursing homes. Stryker-Gordon began by sending nurses to give one-day courses for staff in nursing homes located in Minnesota and surrounding states. But more work was needed.

"There was a real void," she says. "There was essentially no literature on rehab, no one was writing about it, no one was teaching it. So I wrote a textbook called *Rehabilitative Aspects of Chronic and Acute Nursing*." That textbook went into two editions and was translated into Spanish and Japanese. "A nurse who came from Japan for the one-month course made sure the textbook got translated into Japanese, and it's no wonder she did, considering that at the time—the late 1960s—there was only one physiatrist in all of Japan."

Stryker-Gordon's first forays into the world of nursing home care coincided with massive legislative changes set in motion by the Kennedy Amendment that came with the passage of Medicare and Medicaid. Suddenly, all nursing home administrators needed licenses doled out by newly established state licensing boards. "Usually, licensing procedures come after a body of professional knowledge for a certain field has been established," Stryker-Gordon says. In this instance, the reverse happened, and the requirement came first. "It was a dumb thing, but it turned out eventually."

In the wake of the new law, the Kellogg Foundation set up centers to develop curriculum for nursing home administrators. At the time, Stryker-Gordon was the only one who had ever taught such a course. "There was nothing in the literature. There was nothing related to gerontology. Anyone could be a nursing home director. As long as they owned a building, they could bring in the old people and do what they could." The Kellogg Foundation also reached out to George Kenneth Gordon—"Ken"—who was teaching at the University of Indiana. Stryker-Gordon and Ken joined with professionals from a medley of disciplines to create the curriculum. Then the two wrote the first-ever textbook on long-term care administration, which has been published in four editions and is still being used today. "It was," Stryker-Gordon says, "just a very unusual piece of history." The final development came in 1974, when the co-authors married and Stryker-Gordon added Ken's last name to hers.



Ruth Stryker-Gordon

### The Days Are So Short

Stryker-Gordon left her post as Assistant Director of Long-Term Care Administration Education at the University of Minnesota School of Public Health on December 31, 1989. "All I can say is, don't ever retire in winter," she says. "The days are so short. One evening, Ken came home and I said, 'We're going to knock that wall down and put a sunroom on the house to let in some light.'" And so they did. "It just made the house so perfect."

Stryker-Gordon was 62 years old when she left the University. "I thought, wouldn't it just be wonderful to play tennis year round?" But almost immediately, her hip degenerated to the point where a replacement was necessary. "That was it for being a tennis bum. I think maybe I could have played, but the doctor didn't recommend it." Instead she channeled her indefatigable energy into her love of dogs.

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At home, she and Ken had a golden retriever named Ben, without whom she might not have stayed sane in those early days of retirement, she says. Eventually, she began writing about dogs: *Magic Dog* (1995), *It Takes a Dog to Raise a Village* (2000), *Don't Fence Their Spirit* (2003), *Good Dogs: Stories of Benevolence* (2007), *Follow the Dog: A History of the St. Paul Police Canine Unit* (2008), *Catching Canine Abusers* (2013), and *A Handbook for Pet Hospice Caregivers* (2015).

The last title grew out of Stryker-Gordon's work with Peaceful Passing for Pets, the first pet hospice in Minnesota. Peaceful Passing was founded by a friend whose experience as a hospice nurse made her wonder, "Why don't we do for pets what we do for people?" Naturally, Stryker-Gordon ended up writing the book on how to do just that, while also serving on the board of Peaceful Passing.

She's also active on the board of the Minnesota Chapter of Colonial Dames, a group that her grandmother was a part of for many years, as well. "You have to have a relative that was in one of the thirteen colonies and was important in some way," she says. "I happen to be a Lee from Virginia, as in General Lee. I never thought about participating until I had retired, but it's a very interesting group."

Stryker-Gordon's granddaughters live "right across the river" and she and Ken enjoy seeing a lot of them. "I am taking the eleven-year-old for lunch and clothes shopping today," says Stryker-Gordon, who still drives at age ninety. "She is going to pick the store."

### At the First Glimmer

In the early 2000s, Ken was diagnosed with Alzheimer's disease. "At the first glimmer, I rushed him off to the neurologist. It was the earliest diagnosis of anyone on God's earth, because I taught this stuff. I knew exactly what the signs were." Now, the disease has progressed some, and Ruth must remind Ken about his pills (he takes Aricept, among other medications), and help him identify familiar objects like coasters made unfamiliar by the perceptual problems that come with the disease. He does yoga almost every day and closely follows news and current events.

According to the neurologist, Ken's ability to retain a high level of function comes through drawing on his cognitive reserve. Ken's extensive schooling, a doctoral degree and masters in divinity, give him a deep well from which to draw. The couple now lives in an apartment in the Episcopal Homes complex in St. Paul. "Here, we can get the services we may need if Ken requires more intensive care later," she says.

In the meantime, both take steps to remain as healthy and mobile as possible. In addition to yoga, Ken uses the exercise equipment frequently, while Stryker-Gordon does seated yoga twice a week and uses the therapeutic pool three times a week. "I don't walk much because my knee gives me trouble," she says. "It's my only original part—both hips, both shoulders, and the other knee have all been replaced. I got my grandmother's joints—arthritis is my only real disease. Without my new parts, I'd be in a wheelchair for sure." While the couple maintains a healthy diet overall, they do eat a lot of candy now, Stryker-Gordon says. "Reese's Peanut Butter Cups...I could sit and eat them all day."

## Seeking to Change the Nature of Healthcare, Long-term Care, and Public Health for the Next Generation



Olivia Mastry

"Experience has shown me that for a variety of reasons, only a few good collaborative ideas and concepts become reality," says Olivia Mastry, founder of the Collective Action Lab, a unique collaborative forum dedicated to supporting cross-sector, large-scale systems and social change. "That's a loss to collaborators and their communities. Sometimes, it's because participants are doing too many things and don't

have a clear and focused shared agenda, or they lack the support they need to lend themselves to collaboration. But we can no

longer afford to duplicate efforts, fund false starts, or give up before achieving outcomes. We need platforms and practices that help us clarify where our current efforts converge, articulate how to combine them, and efficiently provide resources to support those efforts to achieve intended outcomes."

### The Collective Action Lab: An Innovative Model

With these goals in mind, Mastry dedicated herself to groundbreaking collaborative work in several arenas, including aging. "The nonprofit sector has adjusted to new and challenging realities," she says. Toward that end, the Collective Action Lab's innovative policies and activities bring together individuals and organizations seeking to change the nature of healthcare, long-term care, and public health in ways that can foster health and well-being.

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The Lab's first project, ACT on Alzheimer's, was launched in 2011. ACT on Alzheimer's is a Minnesota statewide collaboration involving over 60 public and private organizations addressing the personal, budgetary, and societal impacts of Alzheimer's disease. The project involves hundreds of participants at the community level, using research-informed tools and resources to effect needed community change. The model is now being replicated across the U.S. and in Canada and has received numerous state and national awards. "We've exceeded what the original recommendations required," Mastry says, "and are moving beyond those toward higher goals."

### Early Catalysts Toward Change-Making

Mastry reflects on the influences that drew her to the field of aging and notes two significant draws. "I was born to very young parents, so my grandparents on both my mother's and father's side had an enormous role in my upbringing," she says. "I saw aging in a more intergenerational and connected way than most young people do today, and it made me want to support older people outside of my own personal life."

The second life experience that fueled Mastry's commitment to work in aging came when she became a caregiver to her mother-in-law who had dementia. "I had two very young children and was running my own small business when my husband and I assumed responsibility for his mother's care, first in her home, then in our home, and finally in assisted living. The experience of juggling those multiple roles with little or no understanding or support from the broader community was eye opening. We're not set up at the local level to support caregivers—and our communities aren't set up to offer meaningful access and engagement for people experiencing cognitive difficulties. We've worked for decades to provide and maintain meaningful community access for people with physical disabilities, and we now need to do the same for those with cognitive challenges, especially as we see

increased prevalence of dementia. This requires large-scale systems and social change, but it must be owned and driven at the community level. Caring for my mother-in-law was part of the impetus for making ACT on Alzheimer's the first initiative under the Collective Action Lab."

Other current projects at the Collective Action Lab include Pathways, which seeks to reform long-term services and supports financing at the federal and state levels, and Silos to Circles, a Minnesota collaborative working to support health at all life stages with services that are integrated, culturally appropriate, equitable, and sustainable. The Lab is integral in bringing together the stakeholders required to pursue and leverage change on complex and large-scale social challenges.

Prior to founding the Collective Action Lab, Mastry, who earned her JD from the University of Minnesota Law School before attending the School of Public Health, practiced health care law in private law practice and ran a successful consulting practice leading nonprofit organizations in strategic planning and governance. She also served as Vice President of the Center for Healthy Aging at Medica/Allina, focusing on Medicare managed care and dually eligible populations. In honor of her contributions, Mastry received the 2015 University of Minnesota School of Public Health Alumni Innovator Award. She was also recently named one of the 35 Women Leaders in Health Care by the Women's Health Leadership Trust.

### Working for the Next Generation

"This work requires people to come to the table prepared for collaboration, systems thinking, effective dialogue, and joint problem solving. Our work is to support the current generation of leaders in this new way of doing business and to help equip the next generation to carry it forward," she says. "I feel really privileged to offer this model to others. Those who are coming up behind us are going to make it better, do it more effectively, and get great results, and I am really excited about that."

## The View from Here

### LTC Consumers are from Venus...Where Do the Rest of Us Come from?



Robert Kane, Director, Center on Aging

I have staunchly maintained that real progress toward improving long-term care (LTC) will require a new public dialog that starts by identifying what we truly want from such care. As Atul Gawande, author of *Being Mortal*, puts it, we need to ask the right questions. As a small step in that direction, I have been conducting a simple exercise with various groups wherein I ask them to write down 3–5 words that best describe the attributes they would like to see in a good LTC system.

When I do this with consumers, they tend to use words like *choice, autonomy, respect, competence, dignity, control, informed risk-taking*. And when I discussed such goals with the provider-dominated Minnesota Leadership Council on Aging, they too came up with a set of core values that resonated with these same constructs valued by consumers. I was thus quite surprised recently when I posed the same challenge to a gathering of geriatricians from different disciplines. Their lists were much more narrow and composed of words like *less regulation, funded mandates, livable wages, better training, private rooms (with baths), care at home*.

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I am not sure how to explain the lack of big-picture thinking among the geriatricians. Maybe they feel beaten up and unappreciated. I feel their pain. But I despair at what it seems to have wrought. If our geriatric medical leaders are not at the front of the pack pressing for more innovative solutions that affect the whole of a person's meaningful life, how can we hope to reframe the discussion? How can we get lay people to see that good care can make a big difference and is worth investing in?

Yes, we need more and better trained staff. But real change will require goals that transcend simply giving more care. They need to make the lives of those receiving that care more worth living.

LTC is being increasingly linked with disability care (witness the newly merged Administration for Community Living). Persons with disabilities demand the right to a full measure of life's social opportunities. Can some of that social expectation rub off on frail older people who need assistance? Assistance and support should not have to come at the cost of what is meaningful to its recipients.

I don't want to sound like Pollyanna and deny that many of the aspects of LTC and end-of-life are harsh and difficult, because they are. But programs like hospice care have shown that they can still provide meaning and comfort despite difficult realities. Shouldn't we seek the same for LTC?

## Fesler-Lampert Chairs Recognized

Since 1999, the Fesler-Lampert Chair in Aging Studies has served as a springboard for scholars in aging research to develop their careers and further the field of aging studies. At an October 7 reception honoring the incoming and outgoing chairs, recipients emphasized the ongoing long-term benefits of the award that far exceed the financial support and protected work time during the year of the award. Important continuing benefits recipients cited included: recognition by colleagues, service on boards, invitations to consult on local and national levels, and opportunities for collaboration.



*Ben Capistrant, Ling Li, Chris Mueller, BJ Fesler, Tetyana Shippee, Edgar Arriaga, Deb Ferrington, and Rosalie Kane at October reception*

Outgoing chair Benjamin Capistrant, ScD, a behavioral epidemiologist in the Division of Epidemiology and Community Health in the School of Public Health, studies disability and aging, especially the adverse effects of caregiving. He is trying to find ways to improve informal caregivers' physical health. He notes that "all of us will need, have been, or will be caregivers." His year of funding served as his springboard to continue his research and to expand its focus beyond the U.S. to collaborations with researchers in India. He has started projects to build a foundation to transfer what we know to working with partners in low- and middle-income groups in other countries. Capistrant has also developed a course called "Population Aging and Health" to be offered for the first time this spring.

The 2015-16 Fesler-Lampert Chair, Ling Li, DVM, PhD, is a Professor and VFW Endowed Chair in Pharmacotherapy for the Elderly in the Department of Experimental and Clinical Pharmacology in the College of Pharmacy. She is a basic scientist who uses animal models to study Alzheimer's disease, and her long-term goal is to translate that work to humans.

During her year as chair, Dr. Li plans to organize a symposium that brings basic, clinical, and social scientists together to promote collaborative translational research and education on aging and Alzheimer's disease. She also hopes to obtain additional data necessary for the resubmission of a promising NIH/NIA R01 grant.

BJ Fesler recalled that, although she and her husband, David, had turned down several requests to support programs at the University, when the opportunity arose to donate to the Center on Aging, they said yes, and never looked back. She appreciates all the chair holders and the work they are doing.

Robert Kane, MD, Director of the Center on Aging, noted that this funding provides an excellent opportunity to reach out to an interdisciplinary group of faculty who contribute to the aging environment. He believes the next measure of success will be the number of collaborations of chair holders in this interdisciplinary effort.

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## In their Own Words

### Catching up with a few previous chairs

*Over the 16-year period since its inception, 18 awards have been given to a very diverse and accomplished group of faculty, thanks to the generosity of the Feslers. We got some feedback from some of these awardees.*



Deborah Ferrington  
(2003-04)

#### Deborah Ferrington

"The award came at a critical time for me, early in my career. It provided recognition by my peers that I had the potential to make an impact in the field of aging. I believe that having this award on my CV helped me obtain funding and promote my career. Now, my work focuses on age-related macular degeneration, investigating disease mechanisms and potential treatments using

human donor eye tissues, primary cultures of retinal cells, and animal models that mimic key aspects of the disease. Along with LaDora Thompson, we have been awarded a T32 Training Grant funded by the National Institute of Aging. I have also been awarded the Elaine and Robert Larson Endowed Vision Research Chair from my department. This chair was specified for a researcher investigating age-related macular degeneration. To future chairs, I would say, make the most of the year, use the funds in a creative way, and, having been recognized as a leader, make sure to help mentor the next generation."



Phyllis Moen (2005-06)

#### Phyllis Moen

"The award was very important in launching the work that eventually resulted in my forthcoming book: *Encore Adulthood: Boomers on the Edge of Risk, Renewal, and Purpose*. I have since been awarded a fellowship at the Center for Advanced Study in the Behavioral Sciences (CASBS) at Stanford University for 2015-16 to finish

up the *Encore Adulthood* book. My 2005 book *The Career Mystique: Cracks in the American Dream*, which also looks at the retirement mystique, won an award: Best Professional and Scholarly Publication in Sociology in 2005."



Edgar Arriaga (2007-08)

#### Edgar Arriaga

"Few analytical chemists focus on aging research, and the Fesler-Lampert chair award gave my research program visibility. My expertise in this field has been put to work in evaluating age-focused grants, career awards, program projects, etc. that include technological components. Now, we develop analytical tools to

investigate age-related alterations to intracellular organization and molecular pathways. Our tools take into consideration that biological systems are ridiculously heterogeneous. I'm fortunate to have also received a K01 from the National Institute on Aging. To future chairs, remember, one year goes fast so put your great ideas to practice right away. Be an ambassador and help sensitize other scientists toward the needs in age-related research."



Walter Low (2009-10)

#### Walter Low

"The Fesler-Lampert Award helped to shape and focus my research towards aging. Currently, I am working on developing a platform technology that will generate human organs and tissues for replacement and repair in age-related disorders. Future chairs should think about big ideas and be persistent in addressing questions related to these ideas."



Tetyana Shippee (2011-12)

#### Tetyana Shippee

"The award allowed me the protected time to focus on developing my research agenda, which examines quality of life for nursing home residents. I also developed a new course on social aspects of aging—first as a "topics course" and now as a regularly offered course to our gerontology students. This work received two awards: Academy

Health, Long Term Care Supports and Services Interest Group, Best Paper Abstract Award, June 2014, and Clinical and Translational Sciences, Best Poster Award, September 2013. Now, my research focuses on quality of life and quality of care in institutional long-term care settings and racial disparities in outcomes. I'm grateful to have received Fellow Status from the Gerontological Society of America."

*Continued*



### Dawn Lowe

"The award helped me to bring nationally renowned scientists to give seminars related to women's musculoskeletal health, and as a result I have made connections that will persist throughout my career. Currently, my research is focused on how the lack of estrogen contributes to muscle weakness in post-menopausal females. To future

*Dawn Lowe (2013-14)*

chairs, I would say, don't wait even a week to get started on your goals for the year. The year will go fast, but the impact on your career can be long lasting."



### Benjamin Capistrant

"The Fesler-Lampert chair helped my work gain recognition within the university and broader community of researchers. It has been a very helpful endorsement to have on my CV when applying for grants; it gives me added credibility, which is crucial as a junior faculty member. And of course it helped fuel my work on aging, particularly around caregivers and their health, and especially with

*Benjamin Capistrant (2014-15)*

regard to my work on caregiving and aging in India—which has nearly 15% of the world's population over age 50. To future chairs, I would say, do work you really care about in terms of aging. It can be difficult sometimes to find support for those ideas, so use this opportunity for those!"

## U of M Nursing Student Receives \$100,000 Scholarship for Her Commitment to Gerontological Nursing



*Mary Whipple*

University of Minnesota School of Nursing student Mary Whipple has been recognized as a promising leader committed to gerontological nursing with a \$100,000 scholarship from the National Hartford Center of Gerontological Nursing Excellence (NHCGNE). A second-year PhD student, Whipple completed her BS in Nursing at

the University of Minnesota's Rochester campus and received her bachelor's degree in biology and psychology from Luther College in Decorah, Iowa.

"I'm honored to have been selected as a NHCGNE Patricia Archbold Scholar!" says Whipple, whose award was the only one of its kind bestowed by the organization this year. The funding supports travel to professional conferences, research supplies, tuition, and a stipend. "It gives me the opportunity to conduct my own research and connect with and learn from nurse leaders in the field of gerontology," says Whipple, whose interest in and commitment to aging studies traces back to early childhood. "I used to spend mornings before elementary school with an older family friend, and I have wonderful memories of making breakfast together. By the time I was

in college, she was in her late 90s, had significant cognitive impairment, and required around-the-clock assistance, so I helped care for her. Despite these limitations, I learned a great deal from her and her family, including how appreciative she was to be able to remain in her own home."

Another formative experience for Whipple came through watching her grandmother's health fail after a fall. "At age 85, she fell in her home and broke her ankle. She had a number of chronic health conditions, including poorly controlled Type 2 diabetes. She developed significant complications following surgery and was no longer able to care for herself, so she had to move to a skilled nursing facility. My grandma was an extremely independent woman who lived alone for more than 40 years, but this one fall changed the course of her life."

Whipple's research investigates how increasing physical activity and decreasing sedentary time may improve health, particularly among older adults with Type 2 diabetes. When the news of her scholarship arrived, Whipple was in the School of Nursing's Laboratory of Clinical Physiology preparing for an exercise test. "I was listening to some music on my laptop," she says, "when an email came in with the subject line, 'regarding your Archbold Scholar Application.' I had to sit down before I opened it." Whipple immediately forwarded the good news to her faculty mentors on the project and Dr. Jean Wyman, who encouraged her to apply and submitted a recommendation letter. "Then I called my parents," she says.

# Interdisciplinary Student Group Promotes Inquiry Across Disciplines in Gerontology

The newly formed Aging Studies Interdisciplinary Graduate Group (ASIGG) sponsored by the University of Minnesota Graduate School promotes the development of critical engagement with a variety of complex problems related to aging. The group is co-directed by Robert Kane, director of the Center on Aging in the School of Public Health, and Jean Wyman of the School of Nursing.

"We're offering a forum where graduate students and professionals from different disciplines can think more deeply about issues related to aging and develop new skills for working together on these issues," says Heather Davila, group member and coordinator. "This is also a place where graduate students can sharpen their skills in writing and presenting information and work with colleagues in other disciplines. Activities include professional development sessions focused on networking, giving effective presentations, branding yourself, submitting abstracts and journal articles, and giving job talks." ASIGG's October 1 kickoff event drew more than 40 people, about 30 of whom were students from at least 15 different disciplines. "It's a very diverse group," Davila says.

James Friedman is a 50-year-old graduate gemologist and jeweler who found nursing as a second career later in life. "My practice has been entirely devoted to late-life care and end-of-life care," says Friedman, a third-year PhD nursing student and a first-year masters student in bioethics who plans to minor in gerontology. "I think the work of the group is to discover the differences and similarities between the professions and roles of people who interact with individuals as they age, and to share what is learned," he says.

ASIGG sponsors monthly activities developed and planned with input from a student advisory committee as well as from students who shared ideas at the recent kickoff event. Group meetings provide graduate students and faculty with



ASIGG Meeting

## ASIGG Group Goals

The Aging Studies Interdisciplinary Graduate Group (ASIGG) has two primary goals:

1. To encourage more thoughtful discussions about how to approach issues around aging and explore what is meant by evidence. We will explore different theoretical perspectives, methodological approaches, and changing conceptualizations of "evidence and knowledge" in the field of aging.
2. To provide concrete opportunities for graduate students to hone research and professional skills to launch successful careers related to aging. The group thus focuses on both the theoretical and the pragmatic aspects of gerontology with an emphasis on fostering interdisciplinary communication and collaboration.

opportunities to explore concepts not usually taught in courses, such as how different disciplines interpret evidence and what constitutes theory in aging. Interested students also have the opportunity to work on a research project called Evidence in Aging, which examines how different disciplines view "evidence."

"About 25 students from a variety of disciplines are participating in the Evidence in Aging project—mostly PhD students but some masters students, too," says Kane, who leads that project. Participating students will interview faculty at the U of M as well as editors and members of editorial boards for several journals published by the Gerontological Society of America (GSA). "It's a chance to gain practical research experience and explore how professionals in different fields and areas of research view evidence differently," Kane says. "Our goal is to help graduate students best contribute to the interdisciplinary field of aging."

Friedman and other students worked with Kane to develop an interview tool for the Evidence in Aging project. Students will conduct interviews, help analyze resulting data, and collaborate to present study results. "I think this work may even reach national audiences at conferences and workshops within gerontological circles, and in other areas of study, as well. We all cross paths at one time or another," Friedman says. He and other students are also stepping up to help plan group activities. "At some point, I will lead a discussion or activity or two for the group," he says.

*Continued*

Another ASIGG member, Jessica Finlay, an interdisciplinary doctoral fellow in the Department of Geography, Environment and Society, is minoring in gerontology through the Center on Aging. "I am interested in quality of later life and how the places people live as they age affect their physical, mental, and social health and wellbeing," she says. "In my geography department, I don't have peers or faculty directly studying aging. This group is a great way for me to meet peers with related interests, swap ideas, get constructive feedback, and learn from the mentorship of our faculty advisors."

"So far, we've been hearing great suggestions from participants for upcoming events focused on professional development, specific research methods, and interdisciplinary research in aging," Davila says. "And we welcome new members or visitors to join ASIGG anytime! Please email [coa@umn.edu](mailto:coa@umn.edu) to join the ASIGG's Google Group, a forum for group members to communicate about upcoming events and other items of interest."

## Upcoming ASIGG Events

**Monday, December 7, 5–6 pm (D325 Mayo)**  
**Effective Networking for a Successful Career in Aging**

Following this session, the evidence project group will meet from 6–7 pm to hear "top 10 tips on networking" from a faculty member and graduate student, as well as brief (3-minute) presentations by 4 group members showcasing their work or interest in aging.

# News, Notes, and Notable Achievements

## Serendipity Grants Awarded

The University sponsored an Aging Convergence Colloquium this past spring that brought together faculty and researchers, along with key experts from the public, private, and nonprofit sectors, to learn from each other and engage in focused dialogue about how to connect our knowledge and resources to meet the needs of the aging population and help communities and employers be proactive in meeting changing demands. In an effort to advance innovation and develop new and productive partnerships, participants were eligible to apply for "Aging Serendipity grants" for proposal development, stakeholder engagement, and other activities. Three projects were funded.

### Planning and Promoting Opportunities for Lifelong Communities

**Marilyn Bruin, Professor, Department of Design, Housing and Apparel, College of Design**

Baby boomers comprise nearly 26% of the U.S. population, and most want to remain in their homes and communities as they age. This project will survey baby boomers for the purpose of planning and designing communities that better meet residents' needs as they age. The aim is to encourage and facilitate conversations between community leaders, planners, developers, residents, and researchers.

### Complexities of Family Caregivers at Work

**Joseph Gaugler, Associate Professor, School of Nursing**

Families provide the overwhelming majority of long-term care to older adults in the U.S. Families may experience stress and negative health outcomes when providing care to

an older adult with a chronic disease, especially while also balancing employment. This project explores the complexities of family care and employment, and findings will inform the development of interventions, services, and policies to better support working family caregivers and their employers.

### Transgender Older Adults in Minnesota: Locating a Hidden Population and Identifying Unmet Service Needs

**Abel Knochel, Assistant Professor, Department of Social Work, UMD**

Older adults who identify as transgender are a largely hidden and underserved population with unique needs. Many experience isolation that may lead to negative health outcomes such as depression, stress, disability, and poor physical health. This project will examine how transgender older adults experience and perceive health and aging services in the Twin Cities Metro and the Arrowhead Region in order to better meet their needs and help them connect with one another.

### New Website for the Center on Aging

The Center on Aging Web site will have a new look and a new URL soon. The new site ([aging.umn.edu](http://aging.umn.edu)) will continue to provide updates on aging-related activities in a more user-friendly format. The new site should be active by early December. Check it out and give us your feedback. In the meantime, continue to access it at [www.coa.umn.edu](http://www.coa.umn.edu)

*Continued*



Jeannine Ouellette

### Curt Johnson Prose Award

Jeannine Ouellette, editor for the University of Minnesota Evidence-based Practice Center and writer of the *Old News* newsletter for the Center on Aging, received an Honorable Mention in the Curt Johnson Fiction Awards for her story "Tumbleweeds," which appears in the November 2015 issue of *December Magazine*.

The purpose of *Old News* is to provide timely information about events, education, and research in aging to the professional and public constituencies of the University's Center on Aging and the Minnesota Area Geriatric Education Center.

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## Happenings

### Minnesota Gerontological Society/MAGEC webinars

#### How to Better Serve LGB and T Older Adults

Thursday, November 19, 2015, 12–1 pm

Marsha Berry, MEd, Education Manager for the Alzheimer's Association Minnesota-North Dakota, will offer perspectives, skills, and resources to support you as you interact with LGB and T older Adults. Register for this free webinar at [www.mngero.org](http://www.mngero.org).

### Minnesota Gerontological Society Annual Conference

#### As We Age: Trends—Triumphs—Transitions

Friday, April 22, 2016

Earle Brown Heritage Center, Brooklyn Center, MN

Registration details will be available at [www.mngero.org](http://www.mngero.org).

*The University of Minnesota's Center on Aging is a University-wide center for research and education focused on aging. Our mission is to foster basic and applied gerontology research and education that will inform public policy, prepare students at the undergraduate and graduate level for work within an aging society, and provide information and outreach to help address the health and well-being of older adults.*