**President's Message**

We are midway through the academic and my presidential year, which is quite amazing. If event density is an important predictor of the perception of time, then this has been a very dense period. In this column, I highlight some of the activities that I and members of the Division 20 Executive Committee have been involved in during the past few months.

**The Presidential Initiative Becomes an Odyssey**

The challenges created by the economic downturn seem to be all we hear about today. Like so many other organizations, APA and our Division are feeling the pinch. APA has experienced a 4% reduction in income associated with membership in 2008, and so have we. There have been cuts to their budget. One of the cuts is to the CODAPAR Interdivisional grant program. As you may recall, I applied for a grant with Divisions 12-II (Clinical Geropsychology), 22 (Rehabilitation Psychology), and 40 (Clinical Neuropsychology) to conduct a search of foundations that are likely to fund aging research, and to then apply for funds. This was my second attempt to fulfill my presidential initiative on fundraising. So we will not be obtaining support for this project.

We will also not be receiving funds from John Santos for our Retirement Research Foundation (RRF) awards program, as Dr. Santos has now retired from the board of the RRF. He has expressed his deep regret for being unable to provide support for awards any longer. We, of course, are indebted to him for his many years of support for Division awards and other projects to expand the role of aging in APA and the larger field. In tribute to his generosity, the Division is honoring him with an award in his name (see below). Meanwhile, we will continue the awards program under the assumption that the funding associated with many of the awards, especially the completed projects, and the mentor awards, is less important than the honor and prestige associated with them. But we are also seeking a new funding source. The RRF has a general grants program, and I have written, with the help of our Awards chairs, Brent Small (former chair), Becca Levy (chair), and Ron Spiro (co-chair), a proposal to RRF for funds from this program to continue the awards for 2009. Becca and Ron and Peter Lichtenberg were very helpful in soliciting quotes from recent awardees to go into the application in support of the great value of the awards. I thank them and those awardees who responded, and with only a week’s notice! I think the awardee’s words are critical to making the case for the grant.

The proposal development process was a bit challenging, as our request deviates somewhat from those generally vetted by RRF. However, I was able to get considerable advice and assistance from Mary O’Donnell, our new RRF program officer, and from Marilyn Hennessey, the just-retired president of RRF, who is now one of their board members. Marilyn is very well acquainted with our relationship with Dr. Santos, and she helped me navigate through the institutional part of the application. She suggested that we show that we would work to be independent of RRF for funding the awards program after 2009, a major requirement of their grants. Here is where the material for the CODAPAR grant mentioned above could be “repurposed” and its history used to show that we have been making an effort to obtain funding (and why I am calling the presidential initiative an odyssey). In the RRF proposal, besides the request for awards, I applied for funding to conduct a search of public documents and websites on foundations and the types of grants they make, to create a searchable database.
President’s Message, continued from page 1

database of this information, and committed to a creation of a Division Development Committee to develop up to 5 proposals a year to solicit grants for our awards program, and in the future, a seed research grant program. I, of course, will play a role in the committee as Past President after August. I also included a section in the proposal indicating that our Division will honor Dr. Santos with an award in his name with our own funds. Much of what was included in the proposal about our relationship with Dr. Santos is reported in the history of his involvement with the Division in this newsletter.

The final aspect of the proposal process that was the most challenging was the administrative one: making clear that our Division, like all others, functions as a partially independent entity through APA to the RRF board members who will review the application. The issue had to do with who should be the signatory on the proposal; RRF asks for the CEO of the institution sponsoring the project. I called upon our intrepid APA contact, Debbie DiGilio, Director of the APA Office on Aging, for help on this: is the Division the institution or is it APA? She put me in touch with the APA Division Services representative, Sarah Jordan, and with the Associate Counsel in the APA office of General Counsel, Jesse Raben. Both Sarah and Jesse were very helpful in explaining how, as a Division, we can apply for and receive grants independent of APA, providing the relevant information and interpretation of the APA Association Rules for inclusion with the proposal, and even working directly with our RRF program officer to substantiate that the Division President is essentially the CEO (!) of the Division and can sign off on proposals as the CEO. Considering that much of this was accomplished in about a week, it’s very impressive.

So, in preparing the RRF application, I was struck once again, by the depth of support I have received from our Division leaders, and from APA staff from multiple offices. We are most fortunate that we have so many people who provide their talents to help us.

I must also make it clear that this effort, however, may not result in funding, because of general economic conditions. It is my understanding that RRF has received many more applications in this cycle than previously, and they have experienced a 30% reduction in assets, an all too familiar story. We of course hope for the best, and will try something else if this effort fails.

John Santos Distinguished Program Development in Clinical Gerontology Award

In my last newsletter column, I mentioned that Dr. John Santos, a longtime Division 20 member, had been on the board of the Retirement Research Foundation and used discretionary funds from that position to support our awards program as well as other Division activities, including clinical geropsychology conferences. At the fall Executive Committee meeting, Peter Lichtenberg, our President-elect, proposed that we create a John Santos Distinguished Program Development in Clinical Gerontology Award in his honor. Peter obtained Dr. Santos’ permission to go forward with this award, and we decided that the Division would provide funds to support this award in 2009. You will find a brief history of Dr. Santos’ generous contributions and information about how to apply for the award on p. 6 of this newsletter. We will present the award at the Division business meeting in August.

Membership/Journal benefit

Joe Gaugler, our very energetic and enthusiastic membership chair, has been doing as much as possible to increase our membership. He’s done a great job with our membership brochure, and has proposed that we invite people who are not APA members to belong to D20, that is, to belong to a professional affiliate class. That requires a change to our bylaws and will be discussed in the next newsletter.

Joe has also raised the questions about whether our members remain satisfied with the journal benefit, given that members in academic institutions are likely to be able to obtain electronic access to Psychology and Aging at no cost to themselves. I have included a short article in this newsletter outlining the results of the vote taken in 2003, with a recap of the findings written by Liz Stine-Morrow, who conducted the survey. We now would like to know whether you are interested in continuing this benefit, as we are nearing
Sex segregation, the separation of boys and girls into same-sex groups in their friendships and casual encounters, is a well-documented, robust phenomenon that is universal across cultures (see Maccoby, 1998 for a review). Researchers typically conceptualize and investigate sex segregation as a phenomenon of childhood (e.g., Martin, Fabes, Hanish, & Hollenstein, 2005). In this article, we suggest that sex segregation as a feature of people’s friendships persists across the life span. First, we consider precursors to sex segregation in infancy and follow the developmental course of sex segregation in friendships from toddlerhood to old age. Second, we present one possible explanation of developmental continuity in sex segregation: a desire to spend time with people who have similar interests and styles of interaction.

The importance of considering developmental continuity in sex segregation becomes apparent when human development is conceptualized as a contextually embedded, life-long process (Baltes, Lindenberger, & Staudinger, 2006). Friendships—voluntary interpersonal relationships characterized by reciprocity—are important across the life span (Maccoby, 1998; Rawlins, 2004). Friends’ interpersonal interactions serve as an “engine” of development (Bronfenbrenner & Morris, 2006), creating proximal contexts within which development occurs. To the extent that friendships remain segregated by sex across age, the proximal contexts friends create through their interactions also remain segregated by sex. Accordingly, interpersonal processes that facilitate and hinder individuals’ adaptation to developmental transitions across the life span (see Hartup & Stevens, 1997; Rose & Rudolph, 2006) may be gender differentiated if friendships occur primarily between persons of the same sex.

Via their interpersonal interactions, same-sex peers are active agents in the socialization of gender-stereotypical interests, traits, and skills (Maccoby, 1998; Thorne, 1993). The gender-typed interests, traits, and skills children learn in sex-segregated peer groups are posited to have important consequences later in life. For example, career selection (Reskin, 1993), the wage-gap in men’s and women’s earnings (Gill & Newman, 2004), and interpersonal processes in romantic relationships (Maccoby, 1998; Underwood, 2007) have been linked to gender-typed behaviors. If friendships remain segregated by sex across the life span, friends’ continuing socialization of gender-stereotypical activities, interests, and skills could make gender-typed behavior resistant to change.

Infancy and Childhood

An orientation toward same-sex peers is apparent very early in life: infants spend longer gazing at babies of the same-sex compared to babies of the other-sex (Leeb & Rejskind, 2004). Around two years of age, sex segregation is observable in children’s peer interactions (Maccoby & Jacklin, 1987). In preschool, children frequently select same-sex playmates over other-sex playmates (Maccoby, 2002). Sex segregation increases from the preschool years to the school years (LaFreniere, Strayer, & Gauthier, 1984), and stable individual differences emerge (Powlisha, Serbin, & Moller, 1993). Sex segregation is often described as one of the most persistent and reliable features of children’s peer groups; effect sizes are “very large” (see Martin & Fabes, 2001).

Adolescence and Early Adulthood

Sex segregation is evident in preadolescents’ peer relationships. Friendship groups and cliques are almost always sex homogeneous (Carter, 1987; Hallinan, 1980). Preadolescents overwhelmingly prefer same-sex peers as partners for hypothetical and actual school activities (Strough & Covatto, 2002; Strough, Swenson, & Cheng, 2001). These preferences also are apparent in later adolescence (Strough, Berg, & Meegan, 2001).

In adolescence, the majority of adolescents’ friends are peers of the same sex, although the proportion of same-sex friends declines relative to preadolescence (Strough & Covatto, 2002). Declines in the relative degree of sex segregation are accompanied by increases in the number of other-sex friends (Poulin & Pedersen, 2007) and romantic partners (Brown, 2004), each of which serve distinct functions in adolescent development (McDougal & Hymel, 2007). Despite the increasing prevalence of other-sex peer relationships, friendships with same-sex peers remain important. For example, interpersonal processes occurring in boys’ and girls’ same-sex friendships have both costs and benefits for adolescents’ adjustment (Rose & Rudolph, 2006).

As in adolescence, young adults have many types of interpersonal relationships, including romantic partners and same- and other-sex friends (Monsour, 2002; Surra, Gray, Boettcher, Cottle & West, 2006). Establishing intimate relationships is a key developmental task of early adulthood (Erikson, 1963). In western, industrialized cultures, the age at which people marry has increased in contemporary cohorts of young or “emerging” adults compared to prior birth cohorts (Arnett, 2006). As young adults delay marriage, friends could assume a relatively more prominent role in fulfilling young adults’ needs for intimate relationships. If so, one implication of young adults’ preferences for same-sex friends over other-sex friends (see Barbee, Gulley, & Cunningham, 1990; Reeder, 2003) could be that sex-segregated contexts of development become more prominent among contemporary cohorts of young adults than in previous birth cohorts.

Continued on p. 4
Middle-Age and Later Adulthood

Compared to the large literature on friendship in childhood and adolescence, friendship in middle-age and later adulthood is understudied (Monsour, 2002). When the prevalence of same- and other-sex friendships at mid-life is examined, same-sex friendships are more common (Sherman, DeVries, & Lansford, 2000). In later adulthood, friendships are usually segregated by both age and by sex (Adams, Blieszner, & DeVries, 2000). Sex segregation is a particularly prominent feature of older women’s friendships (Akiyama, Elliot, & Antonucci, 1996; Dykstra, 1990). Sex segregation in older women’s friendships may reflect that on average, women live longer than men. Thus, in late life women have fewer potential partners for other-sex friendships (Akiyama et al., 1996). Other-sex friendships are more common among older men than women (Wright, 1989), perhaps because women are overrepresented among men’s age peers.

As is the case for earlier periods of development, friends serve important functions in later life, providing both social and instrumental support (Himes & Reidy, 2000; Rawlins, 2004; Strough, Patrick, Swenson, Cheng, & Barnes, 2003). In contemporary American society, divorce has increased in prevalence and families have become more mobile and geographically dispersed. One consequence of these secular trends is that friends could play an increasingly important role in individuals’ adjustment to the normative developmental transitions of midlife and later adulthood (e.g., empty nest, retirement, widowhood).

Summary

It is apparent that sex segregation is a persistent feature of friendships across the life span. Yet, sex segregation is typically conceptualized as a phenomenon of childhood. Researchers have considered potential causes and consequences of childhood sex segregation (Leaper, 1994). In the following section, we extend research that focuses on behavioral compatibility of interaction styles and activity preferences as a mechanism underlying children’s sex segregation (e.g., Fabes, 1994; Serbin, Moller, Gulko, Powlishta, & Colburne, 1994; Hoffman & Powlishta, 2001) to address continuity in the existence of sex segregation across the life span.

Gender-Typed Styles of Interaction

Childhood. Although there are considerable individual differences within each sex, boys and girls tend to display different play styles when interacting with their peers. Maccoby (1998) described boys’ and girls’ groups as representing two “cultures of childhood” (cf., Underwood, 2007). She notes, for example, that boys tend to be more physical in their play than do girls, with more good-natured roughhousing and high spirits, as well as more direct verbal and physical aggression. Boys’ friendships are often based on shared interests and participation in the same activities. Their games tend to be competitive and structured, and their pretend play often involves playing heroic characters involved in combat and danger. When trying to influence their peers, boys are more likely than girls to use direct power-assertive demands or prohibitions, to assert their position without explanation. Boys spend more time than girls in coordinated activities involving large groups of peers. Boys use power-assertive behaviors to display their “toughness” and to form relatively stable, well-defined dominance hierarchies.

According to Maccoby (1998), in their pretend play girls tend to engage in more cooperative or reciprocal role-taking (e.g., enacting family or teacher-student interactions) than do boys. Girls’ pretend play is also more likely to incorporate glamour and romance themes than boys’ pretend play. Conflict occurs less often within girls’ groups, and when girls do display aggressive behavior, it’s often of an indirect or “relational” nature (e.g., excluding another girl from the group; spreading negative gossip about someone). Girls tend to be relatively more cooperative, reciprocal, or collaborative in their conversations than are boys, frequently agreeing with a play partner’s suggestion or softening their own suggestions by putting them in the form of a question. Girls often use conflict-mitigating strategies (e.g., finding out what their partner’s objectives or feelings are, showing opposition or anger indirectly, proposing a compromise, using polite forms of speech, avoiding yelling and shouting). Girls’ same-sex friendships tend to be more intimate than those of boys, with more mutual self-disclosure, physical closeness, and eye contact.

Of course, there are also many aspects of social interactions that do not differentiate boys and girls. Furthermore, for most behaviors on which there are average differences between boys and girls, there is also substantial overlap as well as individual differences within each sex (Hyde, 2005). Nevertheless, there is some evidence supporting the notion that children’s sex segregation may be at least partly explained by a desire for play partners who have “compatible” play styles. Regardless of sex, children tend to choose playmates with similar play styles to their own. For example, Serbin et al. (1994) identified the most frequent playmate for each two- to three-year-old child in their study (based on classroom observations). The identified “best friend” playmate pairs tended to be similar in their level of teacher-rated social sensitivity. Likewise, a child’s popularity (again based on teacher ratings) was positively associated with the best friend’s social sensitivity and negatively associated with the best friend’s disruptiveness. Thus, children both played with compatible peers and avoided incompatible ones, regardless of the sex of that peer. Rubin, Lynch, Coplan, Rose-Krasnor, and Booth (1994) found similar results with newly-formed same-sex groups of 7-year-olds.

Indirect evidence that preferences for comparable playmates are linked to sex-segregated play is apparent in observations of children’s play with same- and other-sex peers. Children generally play much more actively and interactively when in same-sex than in mixed-sex contexts (Jacklin & Maccoby, 1978; Serbin et al., 1994). Moreover, girls seem to show wariness around boys, perhaps reflecting a dislike of their more rough and/or dominating style of play. For example, Jacklin and Maccoby (1978) found that 33-month-old girls were more likely to withdraw and stand next to their mothers or to passively watch their partner play when interacting with a boy than with a girl.

More direct evidence for a link between play-style compatibility and sex segregation can be seen in Serbin et al. (1994).
APA Council of Representatives Report
Submitted by Norman Abeles and Susan Krauss Whitbourne

One of the major issues discussed at the February Council meeting was the budget. APA has been grappling with potentially a deficit budget but as explained by CEO Norman Anderson, it would not be acceptable to operate at a deficit because of the 40% drop in the investment portfolio. Revenue estimates from dues and publications are down and expenses have continued to grow. In response to these challenges, there is now a freeze on Central Office hiring and executive management staff merit raises have been eliminated. Reductions have been made in all of the Directorates. Result of budget cuts and with merit pool is $309 surplus with caution but this could change if revenues are less than projected for dues, ads, mailing list rentals, and publications. Unfortunately the projected budget is based on savings gained by cancelling the Fall round of Consolidated Meetings and to put on “pause” the work carried out by the majority of these Boards and Committees. More on this issue will be forthcoming.

The second major issue concerns the Association’s strategic planning process. Breakout sessions were organized to discuss the Association’s goals and priorities in view of data from a survey of full and student members. A new mission statement was approved and following from this, a new vision statement was approved that reads as follows:

The American Psychological Association aspires to excel as a valuable, effective and influential organization advancing psychology as a science, serving as: A uniting force for the discipline; the major catalyst for the stimulation, growth and dissemination of psychological science and practice; the primary resource for all psychologists; the premier innovator in the education, development, and training of psychological scientists, practitioners and educators; the leading advocate for psychological knowledge and practice informing policy makers and the public to improve public policy and daily living; a principal leader and global partner promoting psychological knowledge and methods to facilitate the resolution of personal, societal and global challenges in diverse, multicultural and international contexts; and an effective champion of the application of psychology to promote human rights, health, well being and dignity.

At the meeting of the Coalition for the Academic, Scientific and Applied Research Psychology (CASAP), issues pertinent to retaining members representing the interests of science were discussed including retaining the dual membership discount with other Federation members. Discussion ensued about Society for Neuroscience being added to this list. However, Council subsequently voted to postpone further action on these pending the outcome of discussion of membership issues in the Strategic Plan.

There was an hour long discussion of the convention which allowed a number of presenters to brainstorm some of the problems that are occurring—problems mentioned included overlap of programming, logistics, cost, involving students, etc. Very good ideas were raised; some related to the task force on involving more scientists in the convention.

Jennifer Manley, Gregory Hinrichsen and Becca Levy conducted a diversity training session on aging which included an interactive quiz and a question and answer period which provided coverage of ageism and its impact on physical and mental health. This session provided Council with an opportunity to question their existing assumptions and stereotypes with the goal of increasing attention of Council to aging as an important area of diversity.

Some comic relief occurred in the voting process thanks to the introduction of an electronic voting system that included infrared “clickers” that recorded Council members’ votes, replacing the former method of hand-raising. The new system worked reasonably well.

We want to remind Division 20 members that it is crucial to keep supporting two Council Representatives through the apportionment vote process. Data from the last vote showed that we are teetering on the edge of losing our second seat. We encourage you to think of creative ways to publicize this campaign to our members!

Springer Springs 20% for 20!!


We thank Sheri W. Sussman at Springer for working with us to provide this benefit to D20 members. Sheri welcomes book project ideas from D20 members; contact her at swsussman@springerpub.com.
the end of the contract with APA to provide a deep discount for the journal but the requirement that all members receive it. It was expected when we first entered into the contract that we would want to revisit this question because of electronic access, so we are doing that now. Please respond to the survey, which is very brief. You can access it via the Web at http://apadiv20.phhp.ufl.edu/div20_survey_2009.htm, send Liz Stine-Morrow (who is again very kindly coordinating this survey) an email response, or mail her your responses. Address information is on p. 23 of this issue.

Joe also suggested that we find new ways to communicate with our student members, so Kevin Petway, our USC student representative, has started a Facebook group entitled “APA Division 20”. This is just starting up, but search for the group on Facebook and join it if you wish. There will be more to come on this.

We have a great APA program for the Toronto meeting put together by Becky Allen and Phil Allen (who are not related) that you can read about elsewhere in this newsletter, and we’ll have more news about Division projects in the next newsletter.

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John Santos Award: A New Division Award to Honor A Geropsychology Visionary and Supporter

In 1994, Dr. John Santos, a longtime board member of the Retirement Research Fund, began to use his discretionary funds for the American Psychological Association’s Division on Adult Development and Aging by funding an award for best student submission to the annual conference. Dr. Santos recognized that psychology, like other health professions, was having difficulty getting its students interested in work with older adults. In 1996, he broadened the use of his discretionary funds when he funded a conference on late life depression as part of the Wayne State University continuing education program. Dr. Santos funded that conference and a conference on clinical psychological issues in older adults annually through 2008 because of his strong belief that psychologists and other health professionals were poorly prepared to work with mental health problems in their older clients and patients. He recognized early in the 1990’s that the hoped for expansion in training for geriatrics and gerontology was not going to be realized and that in the 21st century, established practitioners would need to gain expertise to treat our nation’s older adults, and quickly. By the late 1990’s and into the 2000’s Dr. Santos greatly expanded his support. He used his RRF discretionary funds to ensure that prestigious awards were made to recognize the important contributions of psychologists and students in psychology who worked with older adults. He helped to sponsor a 3-day intensive program on geropsychology organized by the University of Colorado at Colorado Springs, and he helped to sponsor a conference on Training Psychologists for Work in Aging, known as “Older Boulder.”

Dr. Santos recognized that large amounts of monies were now being put forth to train physicians, nurses and social workers, through organizations such as the Reynolds and Hartford Foundations. The absence of support for psychologists in the training enterprise led him to become even more passionate about creating enduring programs and awards that would honor the psychologists and students in psychology who work with older adults.

**John Santos Award.** In 2009, the Executive Committee of Division 20 inaugurates the John Santos Distinguished Program Development in Clinical Gerontology award, using $2000 of Division funds. In creating this award we are honoring Dr. Santos’ belief in the importance of program development. He recently stated: “I have done NIH research, and I have published papers, but my proudest contributions were in creating programs that enhanced the lives of older people and other professionals and from which other psychologists working in geriatric mental health emerged.” The contributions include creating and/or enhancing an academic, clinical, continuing education or other program that has the potential to improve the lives of older adults, other professionals, and colleagues.

Nominees need not be members of Division 20, but they must be nominated and endorsed by a Division member. It will be presented at the 2009 APA convention. Self as well as colleague nominations are welcome. Please submit the nominee’s cv along with a cover letter specifying the specific program(s) that the nominee has provided leadership for, and one or more letters of recommendation from someone who was in a position to see the effects of the program or were a participant in the program. The deadline for applications is May 15. Send applications to Becca Levy (becca.levy@yale.edu).
General Program

Drs. Philip Allen and Rebecca Allen (co-chairs) are excited about the Division 20 Program at APA in Toronto in August 2009. In addition to the presidential address (Dr. Elizabeth Zelinski) and the Baltes address (yet to be announced), four outstanding scientists will be giving invited addresses covering topics illustrating the breadth of interests within Division 20. We also have six symposia presentations, with one co-sponsored by Division 55 (American Society for the Advancement of Pharmacotherapy) and one co-sponsored by Division 21 (Applied Experimental and Engineering Psychology).

Our division recruited Dr. Glenn Smith to present in the Convention within a Convention. Dr. Smith’s presentation will describe the work of the panel recruited by APA’s Committee on Aging and consisting of members from Division 20, Division 40 (Clinical Neuropsychology) and others in updating the Guidelines for the Evaluation of Dementia and Age-Related Cognitive Decline first published in 1998. The invited address will focus on advances in our understanding of dementia and age-related cognitive decline. The address will consider how these advances influence the context and conduct of dementia evaluation currently. Progress in the development of new guidelines will be discussed.

Invited speakers include Dr. Cheryl Grady, whose research focuses on the use of brain imaging to explore the functional changes that occur in aging and how these relate to behavior changes. Her pioneering research program has demonstrated functional reorganization in the brains of older individuals when experimental conditions are conducive to good performance. Her research will aid us in rehabilitation efforts through increased understanding of how brain alterations relate to improvements that occur with cognitive training. Her invited address is entitled How Has Functional Neuroimaging Influenced Our Ideas About Cognitive Aging?

Dr. Louis Burgio will present an invited address entitled Lost in Translation: Implementing Alzheimer's Disease Caregiver Interventions in the Real World. This presentation will provide a brief history of the NIH-funded REACH I and II clinical trials designed to assess the efficacy of interventions to alleviate dementia caregiver stress, burden, and depression. Recent efforts to translate the findings for use in Area Agencies on Aging (AAAs) will be described. The current absence of accepted procedures for translating social-behavioral clinical trials will be emphasized and translational efforts from various perspectives will be discussed.

Dr. Paul Verhaeghen will be presenting an invited address entitled A Walk Down Working Memory Lane: Age Differences in Focus Switching and Retrieval Dynamics in Working Memory. His talk will discuss how age affects two working memory processes: focus of attention for items immediately available in memory and search through an outer store. Evidence suggests that older adults are particularly affected by focus shifting, and that they do not benefit from practice on this task as much as do younger adults.

Dr. Silvia Sörensen will be presenting an invited address entitled Psychosocial Interventions for Older Adults with Vision Loss. Dr. Sörensen’s address will describe the development of cost-effective interventions to build resilience and prevent negative mental health outcomes among older adults with vision loss. She will present interdisciplinary interventions for older adults with low vision and issues and outcomes that need to be considered in incorporating these approaches within current low vision programs.

Student Portion

We would like to welcome everyone to another great year with Division 20. Division 20’s new graduate student representatives, Helena Chui and Kevin Petway, are currently organizing this year’s conversation hour and social event.

Helena Chui is in her final year as a doctoral student at Colorado State University. Currently in the Applied Social Psychology program, she focuses her attention on personality development and psychological well-being in the adult lifespan. Kevin Petway is a first year graduate student in the University of Southern California’s Quantitative Psychology program. His main interests involve analyzing the changeability and stability of personality assessment over the lifespan and across different populations.
Hello fellow Division 20 members,

Although you may be familiar already with the Journal of Experimental Psychology: Applied, I thought I would remind you that this may be an appropriate outlet for your research. The mission of the Journal of Experimental Psychology: Applied is to publish original empirical investigations in experimental psychology that bridge practically oriented problems and psychological theory. The journal also publishes research aimed at developing and testing of models of cognitive processing or behavior in applied situations, including laboratory and field settings. Occasionally, review articles are considered for publication if they contribute significantly to important topics within applied experimental psychology. Areas of interest include applications of perception, attention, memory, decision making, reasoning, information processing, problem solving, learning, and skill acquisition.

The general criteria that I use to determine the suitability for a research project for this journal rests on three criteria:
1) Does the work advance theory?
2) Is an experimental approach used?
3) Do the results have clear practical implications?

With respect to question 1, the research should be presented in the context of extant theories and it should be clear what the implications are of your results for theory development and advancement. For question 2, I include quasi-experimental designs as well; thus age as a grouping variable in a study would be appropriate. Less frequent but still acceptable are papers that provide models, reviews, or meta-analysis of topics that are relevant to applied experimental psychology. For question 3, the research should have potential practical relevance; that is, it should be grounded in a problem space and the implications of the results for that domain should be clear.

We have a strong representation on our board of people with expertise in aging including: Neil Charness, Don Fisher, Art Kramer, Dan Morrow, Raja Parasuraman, Pamela Tsang, and Sherry Willis.

Think about whether your research project meets that criteria described above. We look forward to receiving your manuscripts for consideration in our journal. Please do not hesitate to contact me (wendy@gatech.edu) or my Associate Editor, Frank Durso (frank.durso@psych.gatech.edu), if you have any questions about the journal in general or the suitability of a particular manuscript you are considering submitting.

This year I am pleased to announce that three Division 20 members were nominated for Initial Fellow Status in APA. We will learn the status of these nominations at some time later this spring and the results will be confirmed at the August meeting of Council. In the meantime, we have the opportunity to nominate individuals who are Fellows of other divisions to Fellow status in our division. The deadline for these nominations is May 1. Please consider nominating a colleague or, if you are an APA Fellow in another division, please consider nominating yourself. All that is needed is the individual’s name and a curriculum vitae. Please send these directly to me at swhitbo@psych.umass.edu. Finally, please consider nominating a colleague or yourself for Initial Fellow status. The deadline for these nominations will be Dec. 1, 2009. You can obtain the nomination forms from me. Three referees are needed for each Initial Fellow nomination, and it would be a good idea to line them up now because they will be asked to evaluate your contributions to psychology and to provide a detailed letter documenting your qualifications. Please feel free to contact me if you have any questions about the nomination process and I look forward to working with you in this important process.
I have sometimes described myself as a "rogue psychologist," usually in public in front of a microphone. I obtained my doctorate in experimental psychology with an emphasis on cognitive aging at the University of Houston in 1979. Though trained in information processing and lab-based research, my work quickly evolved into applied realms. I rose through the ranks of academia, becoming a tenured full professor of psychology at the University of New Orleans in their doctoral program for applied developmental psychology. While there I began to develop interventions for persons with dementia based on eclectic blends of theory from different disciplines, including neuropsychology, developmental psychology, behavioral technology, cognitive psychology, and human factors. I left to join the Myers Research Institute of Menorah Park Center for Senior Living in 1995, where I became Director of the institute in 2000. While at Myers I helped develop spaced-retrieval into an intervention that can be successfully applied by rehabilitation staff to enable persons with dementia to learn clinically meaningful goals and maintain them over clinically meaningful time frames. In addition, my staff and I provided training in not only how to implement the intervention, but how to bill for it, get referrals for it, get persons other than rehabilitation staff to maintain it in other words, how to translate the intervention into practice. I have been involved in similar efforts in the development of Montessori-Based Dementia Programming® – translating educational practices from the Montessori method into development of age-appropriate engaging activities for persons with dementia.

In July of 2008 I changed jobs again, and now serve as Director of Research and Product Development for Hearthstone Alzheimer Care, a company that provides assisted living for persons with dementia. We have affiliates in the U.S., France, and Australia, with additional connections in other parts of the world. I have conducted training seminars in translating research into practice in Asia, Australia, Europe, across Canada and the U.S. I have had the honor to serve on a variety of editorial boards for journals such as The Journal of Gerontology: Psychological Sciences, Experimental Aging Research, and Dementia, to name a few. I have over 100 publications in the field, and have co-authored college textbooks. In the past I served on the Division 20 Governing Board as Treasurer, and I set up the original list-serve system for Division 20. I am a Fellow of Divisions 20 and 3 of APA, and of the Gerontological Society of America.

As president I would work to promote the importance of basic, applied, and translational research being conducted by our members to the general public (and to each other), and emphasize the importance of clinical gerontology's

I agreed to submit my name for this Presidential ballot because of my commitment to the mission and tradition of our Division. Historically, there are many reasons why now is an important time to highlight psychological science and practice in the field of aging. For many of us, global aging and the present economic situation are probably two reasons that first come to mind. Current members of Division 20 have much knowledge and experience to contribute to society and individuals in these challenging times when young, middle-aged, and older adults have to deal with unexpected events, such as unemployment and financial loss. Our research and practice provides insight into the different needs and vulnerabilities associated with each phase of life. We can offer advice about the possible short- and long-term consequences for physical and mental health and develop age-appropriate interventions to assist individuals and families adapt to change and uncertainty. As President, I will continue ongoing work to strengthen the Division’s visibility within APA as well as the academic and professional community. In addition, I will work enthusiastically to encourage new members to become engaged in our activities and to carry our mission into the future.

Regular participation in the activities of Division 20 has been a significant factor in my own professional development for more than 20 years. I joined APA and Division 20 in 1988 as an international member and served the Division as Member-at-Large from 2001 to 2003.

I am a Professor of Psychology at the University of Michigan and a Research Professor at the Institute for Social Research. Prior to moving to Ann Arbor in 2006, I was a Senior Research Scientist at the Max Planck Institute for Human Development in Berlin and Professor of Psychology at the Free University of Berlin. My doctorate in Psychology is from Macquarie University in Australia. After this, I completed postdoctoral training in lifespan developmental psychology at the Max Planck Institute in Berlin and accepted an offer to stay there as a research scientist in 1987. I am a Fellow of the American Psychological Association and the Gerontological Society of America and a Member of the Academia Europea.

My research and publications deal with aspects of adult cognition (memory, wisdom, expertise), well-being, and trajectories of psychological aging. In the last decade, I have become particularly interested in the role of cognition and psychosocial functioning in health and longevity. My long association with the Berlin Aging Study (BASE)
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Cameron J. Camp, continued

Contribution to improving the mental health of the ever growing numbers of older adults. Ours is an eclectic, diverse membership. I would attempt to reach out to all members of our division, and emphasize our common ground. I also sing and write sonnets about Alzheimer’s disease – that about says it all.

Jacqui Smith, continued

Provides me and many colleagues with a rich source of longitudinal data about the young old and oldest old. Now that I have joined the NIA-funded Health and Retirement Study (HRS) as Co-PI and established a new program on psychosocial aging at the University of Michigan, I can extend my research to midlife and also examine cohort differences in age-related change. My new projects examine the differential impact of social contexts of psychological change from age 50 to 100-plus and the associations of psychosocial functioning with health and longevity.

Candidates for Member-at-Large

Rebecca S. Allen

Rebecca S. Allen, PhD is Associate Professor of Psychology and a member of the executive committee of the Center for Mental Health and Aging at The University of Alabama. She received her PhD in Psychology from Washington University in St. Louis in 1994. Dr. Allen's research and clinical work focuses on interventions to improve mental health and emotional well-being among palliative care patients and family caregivers in community and long-term care settings, and examination of the factors, including cultural perceptions, that underlie differences between personal and proxy health care decisions and advance care planning. She received a Mentored Research Scientist Development Award from the National Institute on Aging and an R21 from the National Institute of Nursing Research to develop a family-based intervention using components of life review and meaningful activity engagement. Dr. Allen mentors graduate and undergraduate student research and teaches Lifespan Development, Introduction to Statistics, Basic Psychological Intervention Practicum, Geropsychology Practicum, and the Clinical Psychology of Aging.

Dr. Allen has been active in Division 20 of the American Psychological Association as co-chairperson of the 2009 program committee, a member of the elections committee, and a member of the advisory panel to the American Bar Association – American Psychological Association Assessment of Capacity in Older Adults Project. Dr. Allen has also been active in the Gerontological Society of America as a Member-at-Large of the Behavioral and Social Sciences Executive Committee from 2006 through 2008. She currently serves on the editorial board of The Gerontologist and as an ad-hoc reviewer for Psychology and Aging and the Journal of Palliative Medicine, among other journals. She has published over 45 articles and book chapters.

Adam Davey

I earned my Ph.D. from the Pennsylvania State University in Human Development in 1997 with an emphasis on Gerontology and Research Methodology. My early career took me to the University of Georgia, and the Polisher Research Institute (formerly Philadelphia Geriatric Center). Currently, I am an Associate Professor in the College of Health Professions and Biostatistics Research Support Center at Temple University, where I also serve as Director of the Doctoral Program in Health Ecology.

My substantive interests focus on the role of family relationships in promoting and maintaining psychological well-being in older adults and analysis of incomplete and non-independent data. To date, I have published more than 60 articles and book chapters, along with the recently published volume, Caregiving Contexts published by Springer and forthcoming Statistical Power Analysis with Missing Data: A Structural Equation Modeling Approach from Psychology Press. I have a long history of involvement with Division 20, beginning with receipt of a Doctoral Research Proposal Award. I have been a long-time reviewer of student award applications, and have served as Chair of the Division 20 Awards Committee, and on the Program Planning Committee, Science Student Council, and as a regular reviewer for the Annual Meeting and Psychology and Aging.

As a Member at Large, I welcome the opportunity to continue my formal involvement with Division 20 in the ways which will be of greatest service to the Division.
Candidates for Member-at-Large, continued

Jennifer A. Margrett

I received my doctoral degree in life-span developmental psychology from Wayne State University. Following, I completed a NIMH post-doctoral fellowship at the Pennsylvania State University where I focused on cognitive intervention. I am currently an Assistant Professor at Iowa State University in the Department of Human Development and Family Studies. My research program focuses on cognitive development and everyday functioning throughout adulthood and later life. Specific emphases within these interests include antecedents and correlates of cognitive aging, collaborative cognition and interdependence among social partners particularly marital spouses, everyday problem solving, and functional competence.


Division 20 of the American Psychological Association is my primary professional affiliation. I have been an active member of the division since graduate school, serving as the Graduate Student Representative to the Executive Committee, conference abstract reviewer, and for the last few years, co-Editor of the division newsletter. I am honored to be nominated for this position and would welcome the opportunity to serve as Member-at-Large.

Lynn M. Martire

I received a Ph.D. in social psychology with an emphasis on aging and health from Kent State University in 1997, and then completed postdoctoral training at the University of Pittsburgh. I am currently Associate Professor of Psychiatry and Associate Director of Gerontology at the University of Pittsburgh.

My research focuses on the interface between late-life chronic illness and family relationships. I am especially interested in the impact of family members on the health behaviors of ill older adults, and the potential benefit of including a close family member in psychological or behavioral treatments for chronic illness. I have conducted prospective, observational studies and have also developed and tested a couples-oriented intervention for older adults with osteoarthritis. I have been fortunate to receive the 2004 Early Career Contribution to Research on Aging and Adult Development Award from Division 20, the 2006 Outstanding Contributions to Health Psychology Award (Junior Investigator) Award from Division 38, and the 2007 Margret M. and Paul B. Baltes Foundation Award from GSA.

My involvement with Division 20 began as a postdoctoral fellow and I am committed to the mission of our Division. As a member of the editorial board of Psychology & Aging, and as Chair of the Aging and Health Committee for APA, I understand the importance of service. I would enjoy the opportunity to increase my formal involvement in Division 20 by serving as member-at-large.
Candidates for Treasurer

Gregory C. Smith

I am presently Professor of Human Development & Family Studies and Director of the Human Development Center at Kent State University. I received my doctorate in Human Development with a specialization in the Psychology of Aging from the University of Rochester in 1983, and I have held prior positions as Research Associate at the State University of New York at Albany (Ringel Institute of Gerontology) and Associate Professor of Human Development at University of Maryland, College Park. I am the current Associate Editor of the International Journal of Human Development & Aging, and I have been a member of several NIH review panels. My research, which focuses on stress and coping within caregiving families, has been funded by NIA, NIMH, and NINR. I was awarded fellow status by the Gerontological Society of America.

I am very pleased to be nominated for Treasurer of Division 20. I have been a member of APA since becoming a doctoral student. From 2001 to 2005, I served as the Chair of the Division’s Continuing Education Committee and as a member of the Executive Committee. I would regard it as a great honor to serve as the Division 20 Treasurer.

Keith E. Whitfield

Keith E. Whitfield, PhD, is Professor of Psychology and Neuroscience and Professor of Medicine at Duke University. He also directs the Developmental Psychology program and the Center for Biobehavioral and Social Aspects of Health Disparities at Duke. He received his Ph.D. in Life Span Developmental Psychology from Texas Tech University and did a Post-Doc in Quantitative Genetics at the University of Colorado-Boulder. He spent 13 years at Penn State University before joining the faculty at Duke University. He has served as the chair of the Membership Committee and currently serves on the Diversity Committee for Division 5 of APA. He is the immediate past chair for the GSA’s Task Force on Minority Issues and the Fellows Committee and is the current Chair-elect of the BSS section. He serves on the Board of Scientific Counselors for NIA. He has served as faculty for five different NIA-supported summer institutes and as a member of two National Academy of Sciences committees on aging (Aging Mind and Social Psychology of Aging). He is on the editorial boards for Journal of Applied Developmental Psychology, Healthy Aging and Clinical Care in the Elderly, Psychological Assessment and is an Associate Editor for Experimental Aging Research. His research focuses on how health and social factors impact cognitive aging among African Americans. Recent publications include: “Minority populations and cognitive aging.” (in S.Hofer, & D. Alwin (Eds.), Handbook of Cognitive Aging), “Genes, environment, race, and health” (American Psychologist), “Are comparisons the answer to understanding behavioral aspects of aging in racial and ethnic groups? (Journal of Gerontology: Psychological Sciences), “Diversity, disparities, and inequalities in aging: Implications for Policy” (Public Policy and Aging Report).

Margaret Gatz To Receive Award At APA

Submitted by Lynn M. Martire

Dr. Margaret Gatz has won the 2009 Developmental Health Award from the American Psychological Association in recognition of her research contributions to the fields of health and aging. Dr. Gatz is Professor of Psychology, Gerontology, and Preventive Medicine at the University of Southern California.

Margaret Gatz’s research focuses on predictors, correlates and outcomes of physical and mental health problems across the adult lifespan. Her research includes studying risk factors for dementia, examining both biologically-based (e.g., APOE, earlier physical illnesses) and environmental risk factors. Her research in mental health has included studying changes in depressive symptoms with age, the coupling of depression and anxiety over time, associations between depression and physical health and functioning, and the relative environmental and genetic influences contributing to depressive symptoms. She has written articles, chapters and books regarding mental health treatment for older adults and has actively been involved in conferences and working groups informing the public of mental health needs among the elderly.

Dr. Gatz will give an invited address at APA’s Annual Convention in Toronto. This invited address is tentatively scheduled for Friday, August 7th, 2009 from 4:00 to 5:00 p.m.
Imagine you are 83 years old, recently widowed, and live in a nursing home facility. You have difficulty seeing, are hard of hearing, and have an assortment of medical conditions including cardiovascular disease and a recent hip replacement. You also have a diagnosis of Alzheimer’s disease. Your favorite hobbies used to be reading and playing cards, but it has been difficult to engage in these activities where you live due to your functional decline. Due to your medical presentation and disabilities, the nursing home staff often assumes your needs are fulfilled since you cannot articulate them and they often fail to involve you in activities because your impaired function makes it difficult to engage you. Further, sometimes you become agitated and yell at staff. Consequently, you often sit by yourself, idly, without interaction. What might your feelings be about the situation? You may be feeling despondent or even frustrated. It is also possible that the long term care facility may offer you medication or individual therapy from a psychologist. However, is that really enough to help, or is more needed to encourage institutional change? This introduces the unique role of psychologist in long term care that goes well beyond traditional therapy. A psychologists’ role can be to help facilitate necessary changes in mindset, approach, and engagement. Psychologists can do this through consultation, education and role modeling in long term care systems. The ultimate goal would be to support new approaches in how the healthcare system thinks of and works with their aging residents.

Specifically, several elements common to long term care contribute to the situation described above, including reliance on a medical model, the predominant focus on resident limitations, a lack of education on triggers to behaviors and limited expectations for staff efforts toward the engagement of residents. However, when imagining yourself in the situation, I’m sure you wish for some efforts at social connection, even with your functional declines. You may be thinking, “I was once a productive member of society and look how I am treated and acting now!” Although a process of change can be difficult, a lot can be gained through psychologists helping to shift perceptions and mindsets of professional caregivers and institutions.

It is likely that this 83-year-old would benefit from time outside on a porch on a sunny day, eating ice cream, with his/her legs allowed to recline. Although an independent activity, this takes in account the person’s interests (e.g., ice cream, time outside) in a way that is suitable medically and provides some feelings of purpose and the ability to feel like a part of the world. Staff may even like to join in on brainstorming novel activities for the individual (e.g., incorporating his/her job history) and possibly offer a game of large print cards or other types of sensory stimulation (e.g., a soft blanket if cold). This article will offer a framework for implementing a change in mindset in long term care institutions, with an overarching goal of increased engagement for elders. More specifically, the interventions described are designed to help residents like the gentleman described in the scenario offered above. However, first, it in long term care.

With an ever expanding older adult population, the need for resources to assist in the care of this aging group is at an all time high. Increased medical acuity and higher percentages of dementia diagnoses and cognitive impairment complicate the situation at hand, and create more difficult behavioral concerns. Although family members often take on much of the caregiving responsibility and burden, societal changes, declining family sizes, and rising divorce rates are limiting the number of family caregivers. Therefore, additional burden will fall on long term care facilities and staff, with a demand sure to surge in coming decades with the aging baby boomers.

With healthcare’s focus on medical models, challenges exist for psychologists in helping institutions move toward a social model of understanding the process of aging and the necessities of keeping the body and mind healthy. Often, what can be missing from long term care services is the practice of looking at an older individual as a whole person. Instead, care and interventions are frequently based on specifics noted in their current medical chart. We need to help facilitate a switch from viewing long term care residents in terms of their weaknesses and medical concerns (e.g., “This is Tom and he is diabetic”) and switch to a model of viewing older adults as having a unique story and history (e.g., “This is Tom and he was a farmer and fought in World War II”). To think for a minute, would being “incontinent” be the first thing you would want others to know about you? Overall, what is necessary is a move towards behavior management and culture change.

Psychologists can be involved in a process of behavior management. When broadly defined and practiced, behavior management fosters culture change outcomes. Specifically, culture change is a concept based on shifting the perceptions and mindsets of professional caregivers and institutions. With the noted increase in acuity and cognitive impairment in older adults, the more challenging behaviors observed (e.g., combative, wandering) can be frustrating for healthcare staff. This mindset shift encourages caregivers and institutions to look at older adults as individuals with a life history, rather than those “purposefully” causing and instigating these behaviors. This process also encourages the empowerment of direct caregivers, since they are vital to understanding and helping older adults. Further, with increased activity and stimulation linked to slower cognitive decline, behavior management and its culture change outcomes support a focus on providing new and novel engagement for older adults. Although this transition may take time, by bringing one’s life and culture to a long-term care facility, a decrease in behaviors and an increase in engagement can be seen. Therefore, behavior management should be facilitated in healthcare institutions through attitude, education, and environmental changes.

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In consideration of attitude change, caregivers and institutions should be encouraged to work in teams, rather than implementing a top-down approach, to collaborate on decision making and the needs of residents. This multidisciplinary team approach allows for more creative interventions and ideas, and staff should be supported in attempts to “think outside the box.” If “Tom” is calling out and asking for help, consider his needs (e.g., is he hot/cold, in pain, upset?), and attempt something new to help keep him more active and involved. The aim would be to focus less on why his behaviors are bothersome and what may be the purpose behind them. Altogether, this may involve the alteration of process and procedures for providing care. For instance, if staff were persistent in bathing you in the morning when you always took a bath during your independent years at night, would you be very happy with that 8 am shower? Overall, a focus on resident life satisfaction would be a primary goal.

Also, relevant education should be provided to caregiving and healthcare institution staff to help understand the reason behind behavior management, including increased focus on individualized approaches to resident care. This education and training should focus on the specific needs of the facility (e.g., communicating with individuals with dementia), but also keep in mind the intricacies involved supporting a change in mindset in working with older adults. Specifically, staff would be encouraged to explore some of the intrinsic rewards of their job and aspects of the residents they admire or enjoy. Further, praise should be provided to all participants for their efforts.

Environmental changes should also be facilitated to assist with this process of behavior management. With increased engagement as fundamental to improving the quality of life of older adults, as well as reducing undesirable behaviors and the progression of cognitive decline, it is extremely important for all staff to aim to provide more stimulation and active interventions. Redirectional and sensory items should be accessible in institutions and behavioral interventions should be tailored to the individual. Life stories can be conducted with loved one’s of residents to help brainstorm ideas for bringing a resident’s history and culture to his/her room and life in a facility. Further, residents can benefit from more appropriate activities that fit with their strengths and abilities.

Uses of these behavior management approaches have shown success in nursing home facilities and have helped to facilitate culture change outcomes. In a facility noting residents with behavioral issues and residents with diagnoses of dementia, the implementation of a program employing increased engagement, residents centered care, and team collaboration has indicated a decrease in reported behaviors. More specifically, quality improvement data indicated a steady decline in challenging behaviors, as evident by lowering average scores on the annual administration of the Nursing Home Problem Behavior List (Ray, Taylor, Lichtenstein, Meador, 1992). With an increase in falls in this facility due to wandering behavior and the use of chemical restraints for agitation, this method of increased engagement and resident focused care decreased total falls by 26%. The largest change was seen in the amount of weekend falls (i.e., a decrease by 70%).

More qualitatively, it appeared that offering a resident an empty medical chart filled with pictures of Harvard, boats and his family, aided with reminiscence of his times in medical school, the Navy, and with his wife. This intervention provided relaxation and a sense of purpose. Before this intervention, he was often wandering and disturbing other residents on the unit. Overall, shifting the perceptions and mindsets of professional caregivers may be difficult, but it appears effective in facilitating the process of more social models of understanding and engaging the older adult. All in all, the question to ask yourself is, “what you want when you are older?” Would you rather sit idly with nothing to do, or sit with an ice cream in your hand, on a sunny porch? Ultimately, making culture change possible will help all involved in the care of older adults.

Abby Altman is a Ph.D. Candidate in Counseling Psychology at Lehigh University and is a Geriatric Mental Health Therapist and Behavior Specialist at Eldercare Assessment and Resources in Bethlehem, PA, and Dr. Kelly O’Shea Carney is the Director of this Eldercare program.

For more information, please contact Abby Altman at ana4@lehigh.edu

Reference


Upcoming APA Convention Dates and Locations

- **2009** Toronto, Ontario, Canada August 6-9
- **2010** San Diego, California August 12-15
- **2011** Washington, DC August 4-7
- **2012** Chicago, Illinois August 2-5
Historically, research has focused more heavily on losses and degeneration in people of advanced age than on strength and resilience (Hagestad & Dannefer, 2001; Kaufman, 1986). Until recently, gerontology related research predominantly centered on medical disabilities and functional aspects of aging that impede on one’s independence (Bengston, Rice, & Johnson, 1999). Effective treatment must include integrative health care addressing additional aspects of aging other than biological degeneration (American Psychological Association, 2008). Hagestad and Dannefer note that the North American social sciences approach on aging over-emphasizes elders’ individual problems of aging, while de-emphasizing societal factors as a context to their problems.

For example, historical factors directly influence the current generation of elders in a distinctive way. Social changes that have impacted the individual may include: (a) the immersion of women into the workforce, (b) subsequent unsupervised time during an adolescence as both parents begin to work, (c) economic crises, (d) chronic stressors (e.g., living in ghettos or volatile political climates), (e) shifting from a socialistic government to an individualistic market economy, (f) access to better education, and (g) increased control in family planning.

Those who work with elders must consider a more holistic sociocultural developmental model in order to understand and work with the incoming generation of elders. To date, an integrated theoretical model has not been established to holistically service people of advance age. The lack of a general interdisciplinary theory of aging creates a problem such as “unchecked assumptions, a lack of evaluative criteria, and the inability to build upon previous efforts,” (Bengston et al., 1999, p. 12) which makes diagnostic considerations and treatment planning more difficult in clinical practice. A more contemporary aspect of aging in the U.S. can integrate current gerontological research, and acknowledge the enriching aspects of aging and development during the later adult years. The aging experience is shaped by multiple, complex forces i.e., history, cultural meanings, socio economic status, cohort group, and other social contexts. Therefore, elders may develop particular behaviors and attitudes based on unique historical circumstances (Roley, Foner, & Riley, 1999). This article will address later life span development based on external sociocultural influences.

Considerations of Aging from a Psychosocial Positive Psychology Perspective

1. Maintenance & Mature Wisdom. In order to ensure the optimal functioning of older adults, programs that serve elders need to be better equipped to capitalize on elders’ protective factors such as emotional intelligence (Gable & Haidt, 2005). For example, according to Strongman and Overton (1999), elders have an increased ability to moderate their emotions, leading to contentment and acceptance of life. Another example is using elder’s language in describing religious faith as a tool when coping with or accepting life limitations. There are other self-optimizing tools such as using life experience when decision-making. Through life experiences, adults in their sixties and seventies often solve problems using life experiences more effectively (Baltes, 2006). Life experience and awareness of the fragility of life are often undervalued by Western culture (with its emphasis on the abating aspects of aging; Ranzijn, 2002) and as clinicians, we can value a dialogue around elders’ accumulation of life experiences in solving problems with our senior population.

Advanced age is often associated with dependency. However, aging can still evoke a time for self-discovery, meaning making, and resolution with the past. Seniors can establish their sense of self as autonomous by being involved in everyday experiences (Herzog and Markus, 1999) and benefit from heightened relativistic/systematic thinking (Baltes, 2006; Cohen, 2005). Interestingly, Baby Boomer seniors are more acquainted with self-sufficiency, independence, and utilization of technology, and can thus continue to maintain creativity, purpose in life, and interpersonal communication (Sutton, 2008) in late life.

2. Culture. Aging is a culture-specific phenomenon that is interpreted, experienced, and acknowledged differently depending on one’s beliefs, neighborhood, and culture. One’s familial and cultural understandings of aging impacts how one chooses to age. For example, culturally influenced actions include investing time and energy in health preservation, engaging in social activity, and embarking on the social status of being an elder in the community. Although advance age is commonly associated with various losses, some cultures and anthropologists may acknowledge that there are positive social attributes unique to aging. For example, the ‘golden years’ can be associated with an increase in spirituality, the carrier of family history and teacher of cultural/historical customs, a source of wisdom and advisor, and family peacemaker or responsible for family cohesion. Encouraging this role as a narrative in process groups and individual sessions can elicit deeper untapped potential for self exploration. Other factors to consider when working with a senior include illumination of cultural practices such as social activity with younger generations, making meaning of pain, and knowledge of self-care. Being proactive about one’s health or submitting to the natural forces of physical decline, are both complimentary adaptations to aging that are culturally influenced.

3. Focusing Inward. As modern-day seniors retire, they have the time and physical well-being to focus more on personally meaningful experiences outside of social pressures such as attaining monetary wealth, peer status, dealing with uncertainties of role performance, and laboring to achieve.

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career goals (Le, 2008). An Elder’s underlying true values ("organismic valuing process"), may take primacy over earlier developmental influences such as parents and mainstream culture. For example, by advance age, seniors can reclaim parts of themselves that have been denied, and thus completely redirect one’s self-concept. From a traditional existentialist perspective, the less anxiety one experiences about “how to be,” the more he or she can focus on “being” that one truly is. As seniors are forced to come to terms with their limitations and realities of death, their self-concept may be more comfortable with accepting all parts of themselves, suggesting heightened maturity and groundedness. In advance age, one may choose to focus more on short-term, rather than long-term goals. Facing one’s mortality in later adulthood, although always existentially present, helps move an elder from “future-oriented goals to present-focused, emotion-related ones” (Labouvie-Vief, 1999, p. 264). Such goals may emphasize less materialistic affluence and subsequently bringing one closer to finding deeper meaning to life.

Losses, such as bereaving the loss of close loved ones and friends, awareness of one’s own mortality and failing health, and restriction of more youthful roles, can impact the identity of a senior. The experience and adjustment to loss can be buffered by rearranging values, rescaling goals, and adjusting aspirations (Labouvie-Vief, 1999) based on the life circumstance. Self-protective factors such as a positive perspective and self-awareness in the face of death can help cope with losses and increase flexibility. In fact, Fry (2003) finds a positive correlation between self-efficacy and fear of death and dying in people of advance age. For women, higher perceived self-efficacy in social, interpersonal and emotional domains was associated with lower levels of fear of the unknown and fear of dying. The limited sense of fear of mortality can be explained by the reconciliation of life goals. As one is more authentic to their true being and life standards, it is possible to be less afraid of the end because there is less of a need to compensate for things left undone. Furthermore, adaptation with the aging process, such as adjusting one’s goals that are age appropriate, can actually increase a senior’s sense of well-being (Frazier, Newman, & Jaccard, 2007).

4. Autonomy and Adaptation to Change. As the baby boomer generation becomes older, they will experience unique ways of thinking and acting. Having had to adjust to major social changes in the earlier parts of their lives may activate a greater proclivity to adjust and adapt to the challenges of advance age - better than perhaps their predecessors. Furthermore, cohort effects on current elders may maintain baby boomers’ sense of autonomy and sense of mastery well into advance age. For example, having been more autonomous at younger ages, the amplified entry of women into the work force, greater social value of independent lives, and access to information technology, generates increased self-efficacy.

In summary, in order to more competently treat the current generation of retiring seniors, psychological research needs to recognize the contextual factors impacting emotional changes in advance age. Research on older adults outside of the medical model concept is imperative to understand other impacts on aging among Baby Boomers. Some aspects of aging, from a psycho-social perspective include the maturation of emotional intelligence, finer appreciation of those limited number of people who still are in their lives, increased use of resources to protect themselves from physiological decline, and an increase in attention to the positive aspects of aging.

References


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**JOINT COMMITTEE NAMED TO REVISE STANDARDS FOR EDUCATIONAL AND PSYCHOLOGICAL TESTING**

Submitted by Wayne Camara

WASHINGTON — A committee of researchers and experts in educational and psychological testing has been appointed to revise the *Standards for Educational and Psychological Testing* (the *Standards*) - long considered to be the definitive source for information concerning sound test development and use.

Designed to establish criteria for appropriate development, use and interpretation of tests, the *Standards* have been widely cited by states, federal agencies, private organizations, legislative bodies and even the U.S. Supreme Court. They are based on the premise that effective testing and assessment requires test developers and users to be knowledgeable about validity, reliability and other measurement issues.

Co-chairs of the Joint Committee for the Revision of the *Standards for Educational and Psychological Testing* (Joint Committee) are Barbara Plake, PhD, distinguished professor emerita at the University of Nebraska, and Lauress Wise, PhD, principal scientist at the Human Resources Research Organization, Monterey, CA. They, along with 13 additional members, are charged with revising and updating the *Standards* to reflect current research and best practices.

“The *Standards* are more important than ever given the current demand for educational accountability, the increase of testing in the workplace, and the popularity of computer-based testing” according to Dr. Wise. “We believe that we have assembled the right committee to achieve the goal of bringing the *Standards* up to date” said Dr. Plake.

Revision of the standards will continue a long collaboration among the American Educational Research Association, the American Psychological Association and the National Council on Measurement in Education. The three associations have been responsible for developing, publishing, selling and revising the standards since 1966, when the first edition was published. The *Standards* were revised in 1974, 1985 and 1999. The popularity of the *Standards* remains strong to this day, with nearly one million copies sold since 1985.

The Joint Committee plans to hold its initial meeting in early 2009. Staff support for the committee will be provided by the American Psychological Association; questions about the committee and its work should be addressed to Marianne Ernesto at mernesto@apa.org.
et al. (1994) who found that there were no sex differences in play styles among children who had not yet begun to show significant levels of sex segregation. However, among the children who had begun to segregate, sex differences had begun to emerge, with the girls showing higher levels of teacher-rated social sensitivity than the boys. Social sensitivity was also one of the styles on which best friends tended to be similar, regardless of sex. This pattern suggests that children may begin by seeking out peers with play styles that are similar to their own; as these styles become gender-typed, play partners are increasingly likely to be of the same sex as the child. Once sex segregation begins, play styles become even more gender-typed as boys and girls spend increasing amounts of time under the socializing influence of same-sex peers (Martin & Fabes, 2001).

Adolescence and Adulthood. Existing research suggests it is plausible that behavioral compatibility contributes to the continuation of sex segregation in adolescents' and adults' friendships; however, this link has not been directly investigated. Many of the qualities that distinguish boys' and girls' interaction styles and activity preferences in childhood also are apparent in adolescence and adulthood. For example, girls' relatively greater use of affiliative speech increases from childhood to adolescence (Leaper & Smith, 2004) and the difference persists throughout adulthood (Leaper & Ayers, 2007). When assertive speech is examined in adulthood and in childhood, males are found to be relatively more likely than females to use assertive speech (Leaper & Ayers, 2007; Leaper & Smith, 2004).

In addition to developmental continuities in gender-differentiated styles of speech, continuities are apparent in activity preferences. As in childhood, adolescent boys prefer to participate in physical activities, enjoy spending time in large groups (Garton & Pratt, 1991), and engage in competitive activities (Passmore & French, 2001). In contrast, adolescent girls prefer social activities such as visiting friends in their homes, going to parties, discos, and to the cinema (McMeeking & Purkayostha, 1995) and engage in expressive activities (Passmore & French, 2001).

Gender-typed activity preferences in early adulthood mirror childhood gender differences. For example, young men engage more frequently in activities such as sports that involve chance, strategy and physical skill whereas young women engage more frequently in social activities that involve spending time with friends and family (Klonsky, 1985; Mobily, Leslie, Lemke, & Wallace, 1986). These gender-typed activity preferences also are apparent in midlife and later adulthood (Freyssinger, 1995). For example, men are relatively more likely to engage in physical activity (Smith & Baltes, 1998) whereas women engage in social interaction during their leisure time (Adams & Blieszner, 1998).

Summary. Developmental continuity of gender-typed styles of interaction and activity preferences from early childhood through later adulthood provides a starting point for examining whether behavioral compatibility is a mechanism underlying sex segregation across the life span. As in childhood, sex segregation in adults' friendships may reflect choices to interact and spend time with those who share similar interests and styles of interaction. In turn, spending time with same-sex friends may reinforce gender-typed styles of interaction and activity preferences learned in childhood. Thus, gender-typed interaction styles, activity preferences, and sex-segregation may be mutually-defining aspects of a reciprocal process across the life span.

Conclusion and Future Directions

Our review demonstrates the pervasiveness of sex segregation across the life span. Precursors of sex segregation are present in infancy and sex segregation is apparent in friendships from toddlerhood to late adulthood. Considering sex segregation as a phenomenon that persists across the life span gives rise to a number of issues for future research. One issue to be addressed is whether the prevalence of sex segregation waxes and wanes as a function of a person's age and their normative developmental contexts (e.g., school, workplace, family). For example, married couples form friendships with other couples such that friendship networks during midlife may contain more other-sex friends compared to early adulthood. Another issue to be addressed is whether the consequences of same-sex friends for individuals' adjustment depend on age. In adolescence, same-sex friendships have both costs and benefits (Rose & Rudolph, 2006). Later in life, as people prune less-meaningful relationships from their social networks (Carstensen, 1992), the consequences of same-sex friendships for adjustment may be more uniformly positive. In addition to these issues, it is also important to understand whether different or similar mechanisms maintain sex segregation across the life span. In this article, we considered one mechanism—behavioral compatibility—that might operate similarly across the life span to maintain sex-segregated friendships. Other mechanisms (e.g., availability of same- and other-sex peers due to sex differences in longevity or institutional practices such as same-sex classrooms) may be operative only during certain periods of the life span. Together, research that addresses these issues will lead to an enriched understanding of the role same-sex friends play in gender socialization and successful adjustment across the life span.

References


Members present: Phil Allen, Rebecca Allen, Cindy Berg, Brian Carpenter, Joseph Gaugler, Christopher Hertzog, Scott Hofer, Becca Levy, Peter Lichtenberg, Ron Spiro, Harvey Sterns, Susan Whitbourne, Liz Zelinski

Guests: Debbie DiGilio

The meeting was called to order by President Liz Zelinski.

The order of business was as follows.

**CONA Update (Debbie DiGilio)**
Reported on legislation introduced by Hilary Clinton involving the GPE program and modifications from Title 7. APA/ABA assessment handbook is out.

The task-force on Aging Dementia meeting scheduled in March may be contingent on APA Discretionary funds.

The diversity training for council representatives in 2009 is going to be on aging: Becca Levy will be involved in this.

**Board of Scientific Affairs Report (Neil Charness, submitted written report)**
APA is having financial problems and is likely to experience a budget cut. There needs to be additional money in order to support the convention.
There is talk about a change in dues, the membership board was recommending $35 reduction.

A question was raised concerning the last discussion of what will happen about the costs associated with depositing manuscripts into PubMed.

There was interest in having a student representative to the science council.

**Fellows report (Susan Whitbourne)**
Deadline is December 1 and some applications are coming in.

**Council Report (Susan Whitbourne)**
The APA Budget is down, with assets being down some 40%. Council will see that budget in March, will be voted on in August.

You can now vote on-line for candidates, however, you cannot give apportionments on-line, this must be done by mail.

**Continuing Education (Brian Carpenter)**
A successful workshop was done this summer, with proceeds split between Division 2 and Division 20. The preconference at GSA was very successful (led by Martin Sliwinski), with an attendance of 47 people. Robin West sent in a proposal for a workshop on Memory Action for APA. The possibility of doing a statistical workshop for APA was raised and follow-up work will be done on the idea.
Program (Rebecca Allen)
Ideas for invited speakers and social events were discussed.

Membership (Joe Gaugler)
Numerous strategies are being used to reach individuals who might be interested in Division 20 membership: sending out emails to authors who regularly publish in J of Gerontology and soliciting the assistance of APA fellows. The idea was discussed to introduce a professional affiliate category, where individuals could be a member of Division 20, without being a member of APA. Joe was charged with drafting a proposal for this idea.

Awards Committee (Becca Levy)
The 2008 process went well. Given John Sanctos’ retirement, there was a need to check in with the Retirement Foundation concerning its future involvement. Liz will contact the Retirement Foundation to explore the future of the award. Recommendations for increasing the number of senior awards included having EC members nominate individuals, soliciting self nominations, and rolling forward applications that do not receive awards. Recommendations were made to streamline the process, so that it requires less effort on the part of the nominee, which may increase the number of applications (this was accomplished for the Behavioral and Social Sciences awards at GSA).

Treasury report (Scott Hofer)
Division 20 is working well within its budget, with income outpacing expenditures.

Elections.
Nominations are needed for President, Treasurer and 2 members at large.

New Business
1. Special hour for APA’s convention within the convention (Liz Zelinski)

APA President Bray asked if Division 20 wanted to participate in the convention within a convention and the vote was to give up one hour of program time to participate. The program chairs will submit a proposal and decide what track to submit to of existing tracks (e.g., health psychology, methodology/statistics, child and family, neuroscience and neuropsychology). The Division would receive travel funds, 2 complimentary registrations, and the session would carry continuing education credit for participating.

Discussion of possible program suggestions followed with much of the discussion centered as to whether the goal of “the convention within a convention” was directed toward involving practitioners or scientists. Multiple ideas were explored: evidence-based practice, capacity handbook, dementia assessment, aging prisoners, neuroscience, and science perspectives on cognitive capacity.

2. Division 20 and 7 joint reports in the newsletter (Chris Hertzog).

The first of the joint articles was written by Patricia Miller and Chris Hertzog and appeared in the Fall newsletter. Members of Division 20 were encouraged to submit an article with someone from Division 7. The length of the articles is 3000 words.

3. CODAPAR grant application (Liz Zelinski)
Liz applied for a grant to do a report on foundations that might be available for those doing research on aging.
You may recall that as of 2004, members of Division 20 have received the premier journal in the field of psychology and aging as a member benefit. Dues were raised to accommodate this increase in member benefits. As you know, dues are now $44 for members and $27 for students. This was made possible through a bulk purchase agreement with APA, so that members receive the journal at a much-reduced rate. Prior to this, the combined price for division dues and the journal was $71. The Executive Committee had completed a survey of division members, with 67% agreeing to the increase in dues in exchange for the journal benefit.

Reasons cited by those in favor of the proposal included:

- the economic advantage for members
- the incentive it gives to current readers of PaA to join Division 20
- a stronger identity for Division 20 as a function of sharing a core body of knowledge reflected in the journal
- a broader readership, and potentially a broader set of contributors, to PaA that would stimulate a broader range of topic coverage in the journal, particularly in the applied areas

The primary concern raised by those opposed to the proposal was that the dues increase might drive members away, particularly student affiliates. Seventy-one percent of those who were not subscribers to PaA in 2004 said they would retain their membership if dues were increased to include the journal. Based on the survey and discussions with an APA journals representative, the proposal to raise dues so as to include a subscription to PaA was passed by the Executive Committee and brought to the membership at the business meeting, where it was also approved.

Budget data suggest an increase in dues income of approximately $4600 from 2005 to 2006 that is not well explained by a $2.00 dues increase in 2006. This suggests that there was an increase in members, perhaps due to the benefit. More recent data reported from 2006 through November 2008 suggested that membership has remained fairly steady. In December 2008, APA issued a statement indicating that there was about a 4% reduction in membership dues income, and Division 20 is likely to have experienced a similar reduction due to changes in the economy this past fall; the figures are not currently available. However, with respect to the journal benefit, there appears to have been an uptick in memberships at one point and clearly no evidence of systematic membership decline.

The contract for the journal is going to expire in 2010. The Executive Committee has had some discussion about whether to extend the contract and has decided that the membership should be polled again about this. First, we would like to know if you are satisfied with the benefit and would like to continue the contract. Second, because many of the academically affiliated members may now be able to obtain PaA electronically through their library systems at no cost to them, there may be less desire to receive a paper copy of the journal, and this may affect the perceived utility of the benefit. Third, the division subsidizes the student journal subscription, which is optional for them, and we would like to know whether you would like to retain that subsidy.

These are the details about the current journal benefit for the various levels of membership:

- Division 20 members and fellows receive the journal as part of their dues per our agreement with APA, so that dues are higher to accommodate this benefit. APA’s journal policy does not permit members and fellows to opt out of the journal subscription. If we discontinued this arrangement, Division dues would be $20 based on information culled from the Division website and APA information.
• In order to purchase access to electronic packages, APA requires members to buy at least one paper journal. PaA received as part of Division 20 membership does count for that one journal.

• Student affiliates have the option not to subscribe to PaA. In that case, dues are $12. Students who do not want to receive the journal, should write a note on the renewal notice “no journal” and pay $12 (instead of the $27 that is billed). Note that the journal cost of $24 to members is subsidized for students.

• Those who are a “dues-exempt” or “life member” of APA (e.g., at least 65, have been a member of APA for at least 25 years, and have started a dues reduction process with APA), have the option not to subscribe to PaA, and still pay no dues to Division 20. If they do decide to get the journal, they pay just the journal fee of $24.

• International members do not have to pay an extra fee to receive the journal (even though they ordinarily pay higher rates for journals).

• Every year APA sends Division 20 the names and addresses of PaA subscribers who are not members of the Division (there are many). The Division sends these people letters alerting them to the fact that they can join the division and get the journal for less money than they are currently spending on the journal alone.

• The contract for the bulk purchase agreement has a term of 3 years (the minimum allowed by APA). We are in the second 3 year contract with the current journal cost of $24.

Please complete the survey in this newsletter through the Division web site at http://apadiv20.phhp.ufl.edu/div20_survey_2009.htm

or by copying or tearing off the survey form and sending to

Elizabeth A. L. Stine-Morrow
Department of Educational Psychology
University of Illinois at Urbana-Champaign
226 Education Building
1310 South Sixth Street
Champaign, IL 61820

or sending an e-mail to eals@illinois.edu with the subject header "APA D20 MEMBER BENEFIT"

**Psychology and Aging as a Continued Member Benefit?**

MEMBER SURVEY

(1) Membership status:
Student  Member  Fellow

(1) Are you in favor of the proposal to continue the contract with APA for three more years so that Division 20 dues are $44 ($27 for students) including the subscription to Psychology and Aging?
Yes  No

(2) Do you have electronic access to Psychology and Aging through your institution so that you are in effect receiving it at no cost?
Yes  No

(3) Do you favor Division 20 subsidizing the cost of Psychology and Aging to students?
Yes  No

COMMENTS
Emboldened by the success of the Division's CE activities in 2008, we’re moving ahead with new offerings for 2009. But first, a recap.

At APA in Boston, Division 20 and Division 12, Section II cosponsored a workshop on suicide risk assessment conducted by Amy Fiske and David Rudd. Later at GSA in Washington, Marty Sliwinski offered a session on design and analysis of longitudinal measurement bursts. Both offerings highlighted expertise within the Division, while earning a little income in the process.

For 2009, APA has accepted a workshop proposal that again Division 20 will cosponsor with Division 12, Section II. In Toronto Robin West will be up front, conducting a half-day session on memory training. Here's an excerpt from the course description: “This workshop will provide participants with an overview and demonstration of a comprehensive and successful memory training program, focusing on self-efficacy, which they can implement in their own communities. The workshop will inform psychologists about key theories and research in memory training and prepare psychologists to administer an empirically-validated memory training program.” We expect this offering to be very popular with practitioners. Marketing materials for the workshop will be going out to the Division and elsewhere soon, so please pass along the details to colleagues when you receive them.

Because of the popularity of the methods-oriented workshop at GSA, we hope to offer something similar at GSA in 2009. If you have suggestions for a topic or a speaker, please e-mail Brian Carpenter (bcarpenter@wustl.edu) or Shevaun Neupert (shevaun_neupert@ncsu.edu). We are also exploring the possibility of sponsoring CE credits for psychologists throughout the GSA conference, as is available now for social workers and nurses. More details to follow.