

GRANT HIGHLIGHTS

AUGUST, 2009

This information comes from GrantBriefs, RRF's bi-monthly internal newsletter. Much of the information is taken directly from grantees' reports and is presented in their own words. We thank grantees and others for their contribution to Grant Briefs.

U. Kentucky Publishes Landmark Public Guardianship Study

In 2003 and 2005, RRF made two grants totaling \$324,222 to the University of Kentucky Sanders-Brown Center on Aging to produce a national study on older adult public guardianship. The only previous related study, *Public Guardianship and the Elderly*, was produced in 1981 by Professor Winsor Schmidt and colleagues. Their study included a statutory and case law analysis, a survey of public guardianship options, and intensive site visits in six states. This recent study, a collaboration between University of Kentucky, the American Bar Association Commission on Law and Aging, and Washington State University, compares the state of public guardianship in 2007 to the findings of the 1981 study.

Guardianship is a relationship created by state law in which a court gives one person or entity (the guardian) the duty and power to make personal and/or property decisions for another person (the ward or incapacitated person). The appointment of a guardian occurs when a judge decides an individual lacks legal capacity to make decisions on his or her own behalf. Often, guardians are family members or willing friends. Attorneys, corporations, government agencies, or volunteers also serve in such capacity. In some cases, there is no one to help and a "last resort" situation occurs. Public guardianship is the appointment and responsibility of a public official or publicly-funded organization to serve as legal guardian in the absence of willing and responsible family members or friends or in the absence of resources to employ a private guardian.

This collaborative study resulted in the publication of a book, entitled *Public Guardianship After 25 Years: In the Best Interest of Incapacitated People?: National Study of Public Guardianship*. It includes: extensive site visit studies of public guardianship programs in seven states; an update on state models of public guardianship or guardianship of last resort; statutory and programmatic profiles of each state's guardianship system; statutory charts; and conclusions and recommendations, including a Model Public Guardianship Act.

The book presents the study's conclusions about the types of individuals served by public guardians and characteristics, functions, funding, and staffing of public guardianship programs. Conclusions on due process protection and other reform issues and the status of litigation are also presented. The study concluded that public guardianship programs serve a wide variety of individuals. Compared to 25 years ago, the programs tend to serve younger individuals with more complex needs. In most states, a majority of individuals under public guardianship are institutionalized. While all

states except Nebraska have some form of public guardianship, the unmet need is compelling.

Public guardianship programs are significantly understaffed and underfunded. Funding comes from a patchwork of sources, none of which is sufficient. Oversight and accountability of public guardianship are uneven. While litigation is an important strategy for strengthening public guardianship programs, it is rarely used.

The book presents a set of recommendations. It calls for states to provide more adequate funding for home- and community-based care for individuals under public guardianship. It recommends that states adopt or adapt the proposed Model Public Guardianship Act and avoid using a social services model of public guardianship because of inherent conflicts of interest. It recommends adoption of standards of practice on client assessment and guardianship plans, data analysis, cost savings evaluation, and auditing. It provides guidelines on staffing (recommending a staff-to-client ratio of 1:20) and sources and levels of funding. The book also includes recommendations for future research, including a study of the effect of public guardianship services on incapacitated individuals over time, an examination of the role of such services for individuals with mental illness, and an analysis of the operation, costs, and benefits of review boards or committees.

The published book contains very useful information for those working in public guardianship by providing examples of various ways states handle issues, and guidance on which methods are more or less effective in caring for incapacitated older persons. The collaborators distributed 1,225 copies of their 12-page Executive Summary and 275 copies of the full report. They presented findings at several conferences. The Executive Summary can be found at <http://www.abanet.org> and the full report at <http://www.calegaladvocates.org>.

Best Practices Promoted to Help Elderly with Depression

In spring 2008, the University of Washington's Prevention Research Centers-Health Aging Research Network and the Georgia Mental Health Forum co-sponsored a national conference on effective programs for treating depression in older adults. Attended by 200 persons from 31 states, the conference highlighted three evidence-based depression screening instruments and programs: IMPACT (Improving Mood-Promoting Access to Collaborative Treatment); PEARLS (Program to Encourage Active, Rewarding Lives for Seniors), and IDEAS (Identifying Depression, Empowering Activities for Seniors).

To encourage conference attendees to implement these evidence-based practices, RRF made a \$30,000 grant to the University of Washington to design a technical assistance program with tools and resources for replication. The technical assistance program included two components: healthy aging and depression webinars and on-site project implementation assistance. Six webinars, each lasting 90 minutes, were conducted in late 2008. Each webinar included presentations from national research and practice experts and a moderated discussion. The webinars attracted a total of 650 participants, predominantly from state agencies and nonprofit organizations.

The first webinar focused on overcoming stigma. Three covered the specific evidence-based depression care management programs. Two focused on strategies for funding and sustaining the programs. Action briefs on each of the three programs were created. They are expected to reach 3,500 persons by the end of the summer. Action briefs and webinar content are available online at <http://prc-hanconferences.com>.

Following the webinars, University of Washington provided intensive technical assistance to three sites to replicate the programs. The sites were chosen based on a competitive application process. Twelve applications were received. One site was chosen for each intervention.

As a result of the technical assistance, three models are up and running. Charlotte County Human Services in Punta Gorda, Florida is replicating Healthy IDEAS. The Hebrew Rehabilitation Center in Boston is replicating IMPACT. Georgia Association of Homes and Services for the Aging and Georgia Institute on Aging are replicating PEARLS in 15 senior residential communities. The University of Washington received additional funding from other sources to provide more limited technical assistance to service providers in Oregon, Ohio, and North Carolina interested in replicating the models.

The webinars proved to be an effective format for training large numbers of providers from diverse geographic areas and a forum for collaboration and networking. With relatively low-cost technical assistance, three solid replications are underway. The project will be able to continue promoting replication of evidence-based practices because the materials that were developed are now posted on the Center's website.

Hurricane Fund Improves Life for Older Adults in Gulf States

In 2005, in response to the devastating effect of Hurricanes Katrina and Rita on the elderly, the U.S. Administration on Aging called on philanthropy for assistance. Grantmakers in Aging responded by creating the Hurricane Fund for the Elderly to assist those vulnerable older adults who were affected by the hurricanes. Hurricane Katrina was particularly devastating for the elderly. Older adults represented 15 percent of New Orleans' population prior to Katrina but accounted for 75 percent of the dead. The disaster highlighted huge gaps in the service delivery system for the elderly.

RRF was one of the first to respond to the disaster by contributing \$202,680 to the Hurricane Fund for the Elderly. The mission of the Fund was "to provide support to organizations in Alabama, Louisiana, and Mississippi that are giving exemplary leadership to the building, rebuilding, and sustaining of communities in which older adults have the opportunity to serve and be served."

The Fund directed dollars and resources to qualifying nonprofits working to reestablish the older adult service system in the three states heavily damaged by the hurricanes. Atlantic Philanthropies and The Robert Wood Johnson Foundation provided the initial seed money for the Fund and challenged other funders to partner with them. Atlantic Philanthropies and the Woods Charitable Trust covered the Fund's administrative costs. This ensured that all other funds raised went directly to services

for older adults in the Gulf States. Grantmakers in Aging raised \$2.6 million. Grantees raised an additional \$2.1 million through matching and in-kind contributions.

The Fund supported 22 projects in all. Seven projects (41 percent of the Fund) involved the delivery of health and human services. Eleven projects (40 percent) involved future disaster preparedness. Four projects (19 percent) involved legal services, housing, and policy work. Louisiana received 51 percent of the funds, Mississippi 27 percent, and Alabama 22 percent.

Examples of specific projects supported by The Retirement Research Foundation included: a senior citizen's resource center in Mobile, Alabama; a "golden rolodex" of volunteers to aid in the recovery process through the Mississippi Department on Aging; outreach, information, referral and planning for the Southern Mississippi Planning District; and a statewide policy office for the Louisiana Chapter of the Alzheimer's Association.

The Fund's support for disaster preparedness paid off. The new systems were put into effect when Hurricane Gustav hit the region in the fall of 2008. An early and orderly evacuation occurred. Frail elderly received needed support and were evacuated first.

The Hurricane Fund faced several challenges. Although the Director of the Fund made multiple trips to the region, it was a challenge to establish credibility with community leaders and policymakers without a full-time presence. Leadership at the community, state, and federal level was fragmented and in constant flux, and there was no single plan for rebuilding the region. Chaotic conditions and the large size of the area affected by the hurricanes made it difficult to gather information on-the-ground.

The three states affected by the storms are among the nation's most disadvantaged, and their social service systems were only marginally funded and staffed before the disaster. Devastated by the storm, the community structures were left with only a skeletal service system. Cultural differences, the lack of clear funding streams, and the logistics of getting the right people to the right places proved difficult. Plus, many staff of agencies lost everything, including their loved ones, and they were deeply traumatized by the storms.

Despite these problems, the Fund saw some significant achievements. For example, 1,000 seniors in Mobile, Alabama attended disaster preparedness seminars, and almost 500 enrolled in a Senior Alert messenger program. Another 2,500 seniors received information about disaster preparedness. A "Safe Center" was created to provide safe shelter for seniors, complete with generators, food, and clothing. The Southern Mississippi Planning District used a global information system to locate and identify every older adult's residence in case of future disasters. The Mississippi Department of Aging conducted an assessment of expertise needed to restructure and build services for older adults and has been working with AARP leadership to put the plan into action.

National Senior Citizens Law Center Protects Long-Term Care Rights for Medicaid Beneficiaries

In 2007, RRF made an 18-month grant of \$150,000 to the National Senior Citizens Law Center (NSCLC) to protect access to long-term care for Medicaid beneficiaries. Previously, the Foundation had awarded NSCLC two-year funding of \$200,000 for this project.

Over the past 18 months, the demand for NSCLC's advocacy has increased. The move by states and the federal government to restructure long-term care delivery coupled with mounting pressures on Medicaid budgets have threatened access to long-term care for vulnerable elderly. During the course of the grant, NSCLC counseled advocates that were litigating cases in Maryland, Georgia, North Dakota, and West Virginia. It advised advocates in eight other states (Rhode Island, Connecticut, Virginia, Missouri, Illinois, Kentucky, Oregon, and New Hampshire) as they monitored state proposals for long-term care delivery. NSCLC also educated advocates nationally on Medicaid long-term care coverage through a series of educational briefs, articles, teleconference calls, and newsletter articles.

NSCLC won important victories on behalf of Medicaid beneficiaries. IN Maryland, NSCLC won a court case that overturned the state's narrowed clinical eligibility standard for Medicaid-funded long-term care. The decision was based on a previous Kentucky case in which NSCLC successfully assisted local attorneys to win reinstatement of benefits after the governor had declared coverage would be narrowed. In another case, nursing home residents who had applied for Medicaid incurred growing outstanding bills during the lengthy application process. NSCLC won a victory in Georgia, after that state had threatened to evict these residents while the application process was pending.

Advocates called upon NSCLC when Rhode Island won approval for a waiver from the Centers for Medicare and Medicaid Services to establish a new "Choices for Care" program and established some state regulations that were in opposition to federal law. NSCLC prepared an analysis of the Rhode Island statute for advocates who used it to gain state legislative protections for nursing home-eligible seniors on Medicaid. The most notable change assured that persons already enrolled in Medicaid would be covered under the new Choices for Care Program.

During the grant period, NSCLC became an expert on two waiver programs that are driving changes in state long-term care systems: "Money Follows the Person" and "Nursing Home Diversion." Both of these programs expand access to home- and community-based services but risk narrowing clinical eligibility for nursing home care. NSCLC prepared briefs on these two programs and widely disseminated them. They are posted on NSCLC's website. at <http://www.nsclc.org/areas/medicaid>.

NSCLC continues to protect the rights of elderly needing long-term care by giving advocates on the ground the tools they need to be effective. NSCLC is raising awareness of the need to protect seniors at a time when pressures on the Medicaid

program, the primary public source of long-term care support, threaten to erode their rights.

MYR Pilots Retirement Planning Workshops for Women

In 2008, RRF made a \$15,000 Presidential grant to MYR to develop a workshop on retirement planning tailored to older women. MYR, a nonprofit educational organization promoting retirement planning, previously had published a workbook entitled *Mapping Your Retirement: a Personal Guide to Maintaining Your Health, Managing Your Money, and Living Well*. The guide includes contributions from 15 leaders in their fields and provides information on retirement topics, stories, worksheets, a planning process, and access to additional resources. MYR planned to use the guide as the basis for the workshop.

Over the past year, MYR completed a draft curriculum for the women's workshop. It conducted two focus groups to get feedback and revise the workshop's curriculum. A third focus group is scheduled in August. MYR has plans to pilot the workshop in three Minnesota communities, one in an urban area, another in a suburban area, and the third in a rural setting. The first pilot is scheduled for August. Two other pilots will occur this fall.

Entitled "What's Next? Life Planning for Women," the workshop is a series of two events, spaced a week apart. It aims to increase financial literacy, foster engagement, and empower women to achieve their goals. The workshop is designed to be appropriate for women of all socio-economic statuses, races, and ethnicities. MYR has developed a plan for implementing the workshops throughout Minnesota. It plans to reach 480 women in 10 communities through 40 workshops, each to be attended by 12 women. Stay tuned for more information on the locations and dates of the workshops.

Home Delivered Meals Improve for Southeast Illinois Elderly

In 2008, RRF made a \$52,000 grant to the Embarras River Basin Agency (ERBA), a community action agency serving southeast Illinois, to improve its home delivered meals program for homebound elderly. ERBA serves nine rural counties: Clark, Coles, Crawford, Cumberland, Douglas Edgar, Jasper, Lawrence, and Richland. The counties consist primarily of small family farms. ERBA serves 2,200 seniors. This represents 20 percent of the older population of the counties. ERBA serves almost 70,000 home delivered meals annually.

RRF funding enabled ERBA to purchase two new "HotShot" trucks for its home delivered meals program. The trucks replaced vehicles that were seven to eight years old, each having been driven over 100,000 miles. Together the two routes cover 107 miles daily, delivering 121 meals at 88 different stops.

The new HotShot trucks are equipped with oven and refrigeration systems to keep meals hot or cold. This is a significant improvement over the previous situation in

which drivers and volunteers had to rotate meals in portable warmers. This arrangement had raised concerns about hygiene, sanitation, and compromises to food quality.

The elders, staff, and volunteers have been thrilled with the HotShot trucks. ERBA surveyed 75 clients and received overwhelmingly positive responses about the improved quality and temperature of the food. Staff and volunteers' morale is boosted because delivery is now more predictable. The previous trucks broke down on a weekly basis. Repair bills are now considerably lower. ERBA experienced a \$2,000 savings over the first five months of use of the Hotshots. In this tough economy, ERBA welcomes this reprieve.

Four Accessible Faith Grantees Complete Projects

Over the past two months, four Chicago area houses of worship completed accessibility improvements with funding from RRF's Accessible Faith Grant Program (AFG). The first of the four AFG grantees is Grace Lutheran Church, a 375-member Lutheran congregation located in downtown Glen Ellyn. Twenty-five percent of this congregation is age 60 and over. The church offers many programs for seniors who are members of the congregation and other older adults in the community. It operates a daily senior center and nutrition program, a food pantry, and exercise programs.

With RRF support, the church completed construction of three new accessible restrooms on a floor that had no previous facilities. It also renovated three existing restrooms to make them accessible. With additional funding from its members, the church relocated an exterior ramp from the parking lot to an accessible entrance.

While it is too soon to determine changes in the level of participation attributed to accessibility improvements, the church has already expanded its food pantry--just in time to meet increased demand. A neighboring church observed changes at Grace and was inspired to put on an accessible addition to its facilities. This well managed AFG project was completed on schedule, in part, because a volunteer construction committee met every Tuesday, at 7:30 am sharp, to ride herd on it.

The second Accessible Faith grantee, St. Nicholas Church of Evanston, is a large Roman Catholic Church of 4,500 members; 500 are seniors. St. Nicholas has a large Hispanic population, representing almost 25 percent of its membership. Several community groups use St. Nicholas' facilities for 12-step programs, English as a Second Language classes, and counseling. The church sponsors several senior activities for the parish. Most of these activities take place in the social hall. A few years ago, St. Nicholas constructed an elevator for the social hall, but it had no accessible restrooms.

St. Nicholas used a \$23,031 RRF grant to construct a fully accessible single unisex bathroom in the social hall. With the elevator and new bathroom, the social hall is now fully accessible. The project was revised when the congregation further evaluated its original plans. Many persons with disabilities and elders indicated they wanted a unisex rather than single occupancy restroom to be able to accommodate

caregivers. St. Nicholas rebid the project, hired a different contractor, and reduced the cost by \$14,000.

This well managed project faced the challenge of scheduling around the changes in the plans. For example, the church had to accommodate the vacation time of a music school whose space would be affected by the construction. In its final report, the project manager noted the importance of “thoughtful planning, financial strength, and committed leadership.”

The third Accessible Faith grantee, Saint Alexander, is a 4,800-member Roman Catholic church in Villa Park. Twenty-six percent of the congregation is age 60 and over. The church offers several social and support groups for older adults. The church recently completed major renovations to its worship space and parish center, including building accessible entrances with ramps at both front and rear entrances to accommodate its aging population. However, at that time it did not add automatic door openers because it did not have additional funds. A very modest, \$4,256 AFG grant enabled the congregation to complete the project and install the automatic door openers.

The fourth Accessible Faith grantee is Beth Tikvah, a 1,000-member Jewish congregation in Hoffman Estates. Beth Tikvah has 175 members age 60 and over. In addition to many programs for its members, Beth Tikvah sponsors activities for residents of two nearby assisted living facilities and hosts a church that does not have its own facility for worship services.

A modest \$2,864 Accessible Faith grant enabled Beth Tikvah to install automatic door openers at both entrances of the synagogue. Previously, the front and back entrance doors were too heavy and difficult for older persons and those with disabilities to use independently. The synagogue is pleased to have the accessibility improvements completed, especially in time for the fall High Holiday season.

Senior Home Sharing Builds Fundraising Capacity

In 2005, RRF made a three-year, \$76,000 organizational capacity building grant to Senior Home Sharing to develop a comprehensive long-term fundraising plan. Senior Home Sharing (SHS) owns four private homes and a small apartment complex in four DuPage County communities: Lombard, Elmhurst, Downers Grove, and Naperville. The five residences are home for 32 vulnerable elderly. The average income of the residents is just under \$15,000; their average age is 80.

SHS completed an update of its long-range strategic plan to incorporate fundraising goals. Through a SWOT (strengths, weaknesses, opportunities and threats) analysis and interviews with each member of the Board, SHS staff realized that the Board needed more training on fundraising responsibilities. A consultant, supported by the grant, conducted two workshops for the Board. One focused on governance and the other on fundraising fundamentals. SHS reported that these workshops were “a catalyst for transforming the Board.”

SHS planned and successfully implemented its 25th anniversary celebration, netting \$16,000. Although it fell slightly short of the fundraising goal, SHS raised much more than it had ever raised through a special event before. More important, it served to help the newly hired Development Associate create a process to guide future events. In preparation, SHS enhanced its website to allow for donor contributions, created new promotional materials, and incorporated new database software, Giftworks, into its development practices.

SHS' new Development Associate has begun working with SHS staff and Board on cultivating individual donors and corporate contacts. Four new individual donors and one new foundation grant have been added (RRF staff is checking on the amount of contributions). The Associate will continue working on major gifts and developing a plan to grow SHS' small endowment.

Chicago Alliance and Loyola U. Study Aging Homeless Population

In 2006, RRF made a one-year grant of \$176,452 to the Chicago Alliance to End Homelessness to conduct research and advocacy for Chicago's homeless population, ages 50 to 64. The project was developed in response to claims by homeless service agencies that this aging cohort was growing.

The purpose of the project was to identify the unique needs of homeless persons, ages 50 to 64--too young to benefit from government programs targeted to the aged--and to create programs and policies to address their needs. The Chicago Alliance collaborated on the research with Loyola University's Center for Urban Research and Learning.

The research used survey data from the 2001 Illinois Regional Roundtable study of a representative sample of 1,324 homeless or near homeless individuals; 349 were age 50 and over. The project collected administrative data from 33 homeless agencies, conducted eight focus groups with 53 homeless individuals ages 50 to 64, took ten life histories of homeless individuals, and conducted interviews with staff from 55 homeless service agencies. The researchers found that current data on the target population supplied by homeless service providers were similar to characteristics of the homeless individuals ages 50 to 64 studied in 2001.

The study found that a majority of homeless persons aged 50 to 64 became homeless for the first time in middle age. The median age for first homelessness was 47. Service providers reported a 26 percent increase in the homeless population in this age group.

The study found that approximately 40 percent of homeless persons in this age group have the will, ability, and work history to become employed. However, they are hampered by a mismatch of skills to jobs, a decrease in jobs paying a living wage, and ageist hiring practices. For the other 60 percent, employment prospects are extremely limited due to chronic illnesses and other factors. The research found that safety net

programs fail this homeless population. Programs such as Earnfare target individuals younger than 58, and supportive housing and Supplemental Security Income cannot be accessed until at least age 62.

Upon its release, the study received considerable media coverage. The Chicago Alliance held a major conference, keynoted by Mayor Daley, including a panel of specialists in aging. The key message of the study was that homelessness is not necessarily attributed to “bad” choices, but that it can occur as a result of circumstances that could happen to almost anyone. The Alliance has developed a set of policy responses to the needs of this population upon which it is acting.

World Relief Assists Senior Refugees with Resettlement

In 2007, RRF made a \$59,831 grant to World Relief-Chicago for its Senior Newcomer Project. The project addresses the mental health, material, and integration needs of chronically marginalized and underserved elderly refugees. This was the third and final year of support for the start-up of this project. Previously, RRF had provided two-year funding of \$104,822 for the project.

World Relief has found that elderly refugees are especially vulnerable and in need of mental health assistance. The trauma they experience is unique and the treatment more complex. They experience profound social isolation, loss of role, disruption of marital relationship, and alienation from resettled children. They have a greater sense of loss of country, position in society, and cultural norm than their children and grandchildren. Adjustment to U.S. culture is far more difficult. These seniors often experience a strain or split in family relationships due to issues of finance and culture.

In the third year of the project, World Relief served 135 seniors with case management, psychosocial and therapeutic group support, individual mental health treatment, a weekly drop-in center, and field trips. All newly arriving seniors were screened for mental health and tangible needs. The seniors ranged from ages 55 to 91 and came from Bosnia, Iran, Iraq, Afghanistan, Mauritania, Somalia, Columbia, Russia, Burundi, and Burma. World Relief partnered for the first time with CLESE (Coalition for Limited English Speaking Elderly) to screen an additional 26 seniors. Individual therapy services were provided for 28 seniors. Overall functioning improved on the Global Assessment of Functioning Scale by an average of 11 points. World Relief’s psychiatrist treated 25 clients. World Relief provided case management for 67 seniors.

This year, World Relief added new resettlement programs for Iraqis, Bhutanese, and Burmese. Sexual violence toward women and the slaughtering of husbands is a common trauma for Iraqi seniors. The Bhutanese suffered ethnic cleansing in Bhutan and fled to Nepal. They are now being ousted from Nepal. World Relief’s Senior Newcomer Project is extremely important for these isolated communities of seniors.

As World Relief gained more experience with elderly refugees, it learned the value of partnering with other senior service providers. It has developed linkages with Heartland Alliance, White Crane, the Bosnian Community Center, Levy Senior Center, Albany Park Community Center, Hamdard, and Asian Human Services. It is now a

member of Health Albany Park, a network of service providers for the community. World Relief has secured most of the funding needed to continue the Senior Newcomer Project. Funds are primarily coming from the State of Illinois. However, impending cutbacks could put funding at risk.

OWL Partners with RRF Grantees to Train Nursing Assistants

OWL (the Older Women's League) is a national organization that promotes the well-being of midlife and older women. For the past year, OWL has been partnering with the National Network of Career Nursing Assistants to increase awareness among nurse aides of the signs and symptoms of mental illnesses in the elderly. The nursing assistants are also learning how to engage in behavioral activation, a method of treating depression. OWL began by providing train-the-trainer sessions and direct training for nursing assistants in three states.

OWL has been assisted by Dr. Sarah Qualls, University of Colorado at Colorado Springs, and Dr. Peter Lichtenberg, Wayne State University. Drs. Qualls and Lichtenberg were PIs on two grants from the Foundation to train home health care service providers in occupational and physical therapy and nursing to recognize mental illnesses in community dwelling elderly. The educational tools developed under these grants are being used by OWL and the National Network of Career Nursing Assistants. OWL hopes to expand its training to more nursing assistants over the next year.

APA Names Award for John Santos

At its last Board meeting, The Retirement Research Foundation made a \$21,600 grant to the American Psychological Association (APA) for an awards program in adult development and aging. APA Division 20, which represents members interested in adult development and aging, will use \$2,000 of the grant to create an award in honor of retired RRF Trustee, John Santos. It is entitled the "John Santos Distinguished Program Development in Clinical Gerontology Award." The award will be presented annually to a leader who has contributed to creating 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. The first award will be presented at APA's annual meeting in early August.

In learning of this honor, Dr. Santos stated, "I have done NIH (National Institutes of Health) 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."