

The NEWSLETTER

of the South Carolina Center for Gerontology

FALL/WINTER 2003

A Consortium of Clemson University, Coastal Carolina University, The Medical University of South Carolina, South Carolina State University, The University of South Carolina, Winthrop University, and Lander University

Director's Message

It is an exciting time for me to be joining the faculty at the University of South Carolina's College of Social Work and directing the South Carolina Center for Gerontology. Our field is on the verge of rapid expansion, more widespread recognition and complex challenges, as our existing population ages and as an increasing number of older adults migrate here.

I am relocating from Minnesota, albeit for different reasons, from a long career at the Veterans Affairs Medical Center. For that organization, I participated in interdisciplinary health clinics aimed at veterans with dementia, conducted research on older drivers and on care giving, and educated the community on numerous aging issues. The nuances may vary, but many of the issues faced by older adults are similar throughout the nation. I hope to bring an added perspective to the work my many new colleagues in South Carolina have already forged.

Since my arrival in August, I have already had the opportunity to meet with the Center's Board of Directors and to confer with the former director and his able staff. There are certainly a large number of parties in South Carolina who take interest in aging, a foundation that can clearly be built upon. I am pleased to observe the collaboration among so many colleges and universities, so many different disciplines, and so many public and private community organizations. At our recent Board meeting in September, a spirit of renewal was in the air.

Clearly, my first year will be spent learning the particular gerontology issues that are of greatest concern in South Carolina, and meeting all of you who have a vested interest in seeing better outcomes for aging research, aging outreach and aging legislation. I see my role as Director in spearheading active engagement and connecting like-minded professionals. This particular newsletter has been streamlined in order to get it out quickly and keep past momentum alive. Before the spring edition, I'll be informally getting your input on ways to focus on everyone's joint interests and make it more locally pertinent.

With the other life adjustments I have had to make – new home, new job, and new colleagues – it certainly helps to have had an easy transition into this role. Many personal thanks to Dr. Gerald Euster for a seamless handoff, and for sticking around this year to teach me the ropes. He also deserves kudos from the Consortium for many years of service. I'd also like to acknowledge Mrs. Geraldine Washington, the Center's full-time staff person, for embracing my many questions and providing continued assistance in so many ways. I could not have been able to get up and running without their help.

Gerri Adler, MSW, PhD
geri.adler@sc.edu

Functional Abilities Counseling and Testing for Seniors (F.A.C.T.S.)

The Functional Abilities Counseling and Testing for Seniors (F.A.C.T.S.) program is a cooperative effort of the Department of Exercise Science and the USC School of Medicine, Division of Geriatrics. It is under the direction of Dr. Harriet G. Williams. F.A.C.T.S. is designed to assess a broad range of functional abilities of the elderly and to provide information and recommendations about the maintenance and promotion of functional health and prevention of functional declines.

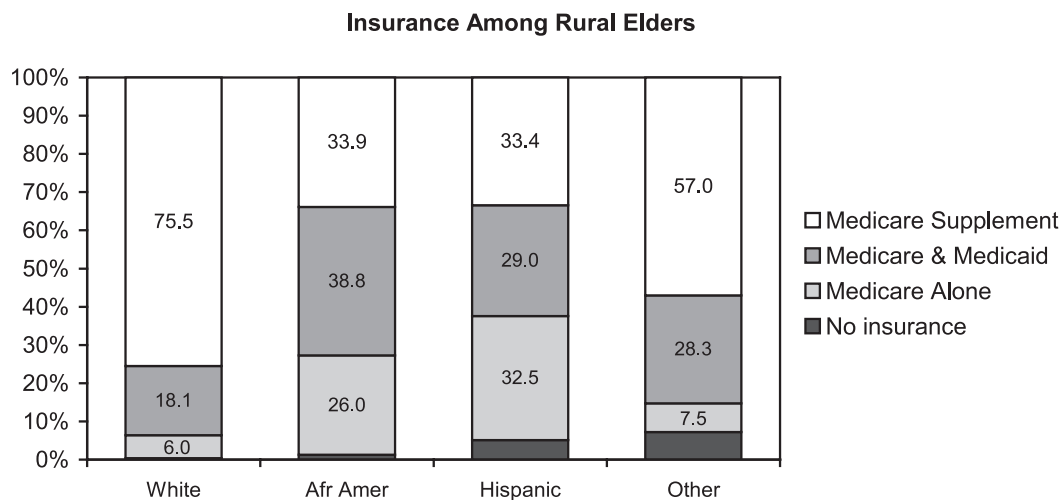
The F.A.C.T.S. program offers several services including assessment of selected functional abilities of elderly individuals, development of objective profiles of these functional capacities, and counseling and/or prescription for appropriate follow-up interventions.

For further information contact Dr. Williams at the Perceptual-Motor Development Laboratory, School of Public Health, Department of Exercise Science, University of South Carolina, Columbia, SC, 29208; 803-777-2863 or 803-777-7932; E-Mail: hwilliams@sph.sc.edu.

Study Examines Healthcare for Rural Minority Elders

A national study of minority elders living in rural areas has shown that they rely almost exclusively on Medicare and Medicaid for their health insurance. The report, compiled by researchers from the Arnold School of Public Health, found that minorities, including African Americans and Hispanics, were about half as likely as white elders to have supplemental private insurance to cover their healthcare costs. Three of every four rural white seniors said they have private insurance to supplement Medicare, but only one of every three African Americans or Hispanics has this resource. Rural elders of other races, including Native Americans and Asian Americans, fare somewhat better, with over half reporting supplemental private insurance.

To learn more about this research, contact Janice C. Probst, Ph.D., Associate Professor, Department of Health Administration, Arnold School of Public Health, University of South Carolina, Columbia, SC, 29208; 803-777-7426 (SPH) or 803-251-6317 (Research Center); E-mail: jprobst@sph.sc.edu



The Center on Aging Medical University of South Carolina

The Center on Aging is a research, service, and education center at the Medical University of South Carolina. The center was approved by the South Carolina Commission on Higher Education December 3, 1987, giving it the status of the oldest research center at the University. Dr. Lotta Granholm came on board, as the fourth director for the center, July 1 of 2001. The first task as a director for the Center on Aging was to appoint an executive committee. In collaboration with the executive committee (which has members from 5 colleges), the Center proceeded to develop a detailed business plan. During the same time period, MUSC began its strategic planning process. The Healthy Aging work group was instituted by the president for MUSC, Dr. Greenberg, and began its work in the beginning of 2002. The Healthy Aging work group also functions as the Internal Advisory Board for the Center on Aging. It was determined in this work group that the Healthy Aging Initiative at MUSC can be implemented in 3 steps:

- A. Information
- B. Infrastructure
- C. Implementation

Vision and Mission

The Center on Aging vision is to be a nationally and internationally renowned center that combines translational

research with professional education and public outreach programs.

Towards this end, the Center has developed the following strategic goals:

1. Create connectivity between patient care and research objectives.
2. Enhance interdisciplinary knowledge and exchange of ideas between basic science, clinical programs, and representatives from social and behavioral research.
3. Partner with foundations, industry, and other institutions in order to develop successful treatment plans for age-related diseases.
4. Increase and broaden education in Gerontology and Geriatrics for all health professionals at MUSC.
5. Increase and broaden the knowledge of the general public as well as health care providers statewide in the field of aging and age-related disease.
6. Become a resource center for the general public as well as for researchers and students in gerontology and geriatrics regarding age-related disease, community programs and services, and funding sources for research.

For more information contact: Dr. Lotta Granholm, Center for Study on Aging, Medical University of South Carolina, 26 Bee Street, Charleston, SC 29425. Email: granholm@musc.edu Telephone, (843) 792-0712.

“Continuing the Year with a Bang Plus!”

The good news – in Year 1 over 1,000 students, practicing health and social services providers, faculty, and caregivers attended SC-GEC initiated or co-sponsored trainings in aging in South Carolina. The great news is that for Year 2, we doubled this number. Special thanks to our consortia members and all our statewide partners for helping make this a reality. New staff members are: Kesha Wall, MSW, program coordinator, and Yolanda Morrison, administrative assistant – a great team!

The SC-GEC recently completed a HRSA/AOA Health in Aging Event. With partners, Elderlink, Inc, LC AHEC, and Palmetto Alzheimer’s Chapter, a Senior Blast was planned and held serving 702 seniors in the tri-county area. Next, we plan an Alzheimer’s Communication train-the-trainer evidence-based program with Dr. Danielle Ripich as author and featured presenter. Our goal is to have our trainers disseminate the program across SC in the next three years. The AHEC co-sponsored community forums will again be scheduled in the four AHEC regions. This year HIV AIDS and the older Adult is the focus. With our consortia partners, we are participating with various statewide conference planning committees to recommend aging-related topics at sessions. If you would like to be a presenter at a SC conference or a speaker at an aging training, please call the SC-GEC office.

More good news – The SC-GEC was awarded a grant from the HRSA-GEC program to develop training in oral health for older adults. SC is 2nd in the nation in oral cancer. The SC State Oral Health Plan has focused on children. We will be partnering with Dr. Ray Lala, state dental officer, who is in process of conducting regional strategic planning to include adult oral health in the state plan. Other partners include the SC Technical Colleges’ oral hygiene programs, Dr. Terry Day, head and neck cancer specialist, MUSC College of Dental Medicine, SC AHEC, and Coastal Carolina

University as well as many of our current partners. A 40-hour web- accessed oral health curriculum, a state oral health conference, and training in oral health assessment for students and primary care providers are the proposed activities.

The Center maintains a website as a central resource for listing all geriatric education opportunities in South Carolina. The site offers information about SC-GEC consortia members, statewide partners, and links to other aging related resources across the country. The center continues to increase awareness and offer a 40-hour Certificate of Continuing Education in Geriatrics and Gerontology for approved trainings. If your organization is sponsoring a continuing education event in aging, please contact the center to make sure you are listed on our calendar and receive approval and SC-GEC forms for your event. Each session attendee must complete the participant registration to receive credit for hours of training. When a participant completes 40 hours of training in geriatrics and gerontology, an official SC-GEC 40-hour CE certificate will be issued. For those completing 80 hours and on, the certificate will be updated to signify the total hours trained.

If you would like to receive more information about the SC-GEC, or have an idea about how your organization can work with the center to provide continuing education in geriatrics and gerontology to faculty, students, health and social services providers, and caregivers in South Carolina, please do not hesitate to contact us through the website at www.musc.edu/scgec, or by phone at (843) 792-1244, Fax: (843) 792-0679.

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Dr. Geri L. Adler, Director
South Carolina Center for Gerontology

Geraldine B. Washington, LMSW
Editor

Stephen R. Kodwo,
Graduate Assistant

DeSaussure College
University of South Carolina
Columbia, SC 29208

Telephone: 803-777-4221

Fax: 803-576-5501

E-mail: geraldinew@gwm.sc.edu

CAREER RESOURCES FOR GERONTOLOGISTS

The Association of Gerontology in Higher Education (AGHE) has created a website dedicated to providing information and support to persons interested in pursuing careers in gerontology. To learn more visit www.careersinaging.com.

For those interested in finding jobs in the field of aging, the Gerontological Society of America (GSA) provides access to employers at www.AgeWork.com.

South Carolina Respite Coalition

“Respite” means “relief”. A break that allows one to return to a task refreshed. Approximately 1/4 to 1/5 of American families are providing care for a person 50+. This is 22 million families and the number is expected to grow to 39 million by 2007! And this figure does not include those caring for someone under 50. What do family caregivers of elders, of people with M.S., of people with brain or spinal cord injury, and of children with serious emotions disorders or special needs have in common? They all need a break sometimes! As little as 4 hours of respite a week has been shown to improve caregiver’s mental and physical health significantly. In turn, caregivers are less likely to become abusive or burn out and resort to institutionalization. Respite is cost effective:

\$2-3,000 a year versus \$40-75,000 for institutionalization.

The S.C. Respite Coalition is a private, non-profit organization dedicated to expanding quality respite in S.C. In 1999, 27 agencies joined Family Connection of S.C., Inc. the S.C. Disabilities Collaborative and the Center of Child and Family Studies at USC College of Social Work to create the only statewide organization devoted to LIFESPAN respite. They recognized that family caregivers of any age need a break from 24-hour care giving, no matter for whom they care. It is now one of 30 Coalitions nationwide. Incorporated in the summer of 2001, the Coalition employed Susan Carlton, an MSW with 24 years experience in aging, volunteer administration and human service, as the Executive Director that October. Ms. Carlton received her MSW and Certificate of Gerontology from USC in May 2000.

The organization does not currently provide respite, but helps people to find respite in their local communities. The first objective is to make respite easier to find for family caregivers. Another is to make people aware of respite and how essential it is. The ultimate goal is to increase respite for all family caregivers in the state. The organization reaches out to family caregivers, legislators and other policy makers, faith communities and the general public. It informs its constituents of legislation about respite and best practice models. It provides training and some resource materials for families and professionals. The organization will provide technical assistance to organizations trying to develop respite programs or volunteer respite teams. Current funding is from donations and grants.

“Benefits of a Break” brochures urging family caregivers to seek respite are available for any organization to customize with their own address and phone number. “What you need to know about me,” a notebook for caregivers of people with dementia to leave with respite providers is available. Presentations on the benefits of respite, what professionals can do to persuade family caregivers to use respite, and what the faith community can do about respite may be requested.

For further information contact the S.C. Respite Coalition: P.O. Box 493, Columbia, S.C 29202. (803) 935-5027, or 866-345-6786 (toll free), or screspitecoalition@yahoo.com.

PRESENTATION

Euster, G.L. (University of South Carolina) “Reflections upon University Retirement: With Thanks and Apologies to James Joyce,” Annual Conference, British Society of Gerontology, Newcastle upon Tyne, England, September 2003.

South Carolina Center for Gerontology POLICY BOARD

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Dementia Dialogues Collaboration A Success!

In collaboration with the Bureau of Long Term Care, the Office for the Study of Aging at the Arnold School of Public Health at USC has been conducting *Dementia Dialogues* across the state. Dementia Dialogues is a five part learning experience designed to educate individuals who care for persons who exhibit signs and symptoms associated with Alzheimer's Disease. Each session is one and one-half hours in length and upon completion of all five sessions, participants receive a certificate of completion and a fabric "patch". Topics include: The Basic Facts, *An Introduction to Dementia*, Keeping the Dialogue Going, *Communication Skills* and It's a Different World, *Environment, Safety and Helpful Hints*. The remaining sessions discuss "Challenging Behaviors". This training is provided to facilities and other related organizations at no cost.

Over the past year, Jan Merling, M.A., has conducted 250 class sessions in 55 locations reaching over 2800 participants. Training sponsors have included retirement communities, hospitals, hospice, Area Agencies on Aging, nurs-

ing homes as well as membership organizations. Participants include Certified Nursing Assistants (CNAs), Personal Care Assistants (PCAs), Community Long Term Care nurse consultants and case managers, nursing home administrators, nurses and dietitians, Ombudsmen, Department of Health and Environmental Control (DHEC) surveyors, family caregivers, members of the clergy, funeral directors, beauticians and others.

The Alzheimer's Disease Registry of the Arnold School of Public Health at USC has projected that 56,870 individuals in South Carolina will have a diagnosis of Dementia by 2005. Alzheimer's Disease is the leading cause of dementia accounting for approximately 61% of individuals with dementia. Caregivers of individuals both in the community (58%) and in nursing facilities (37%) have found the classes beneficial.

For more information about Dementia Dialogues please contact Jan Merling at 803-777-5344.

OTHER AGING NEWS

Forti, E.M. (South Carolina Geriatric Education Center) Appointed Advisory Board member South Carolina Alzheimer's Palmetto Chapter, October 2003; Appointed Member Trident United Way Supporting Older People Vision Council, 2003; Proposal Reviews – The Retirement Research Foundation, 2003; SC RCMAR pilot proposal reviews, 2003; National Association of Geriatric Education Centers, Distance Learning Task Group, 2003; Scholarly Report: National Geriatric Education Centers, Task Group on Distance Learning Peer Review Process, 2003.

Nursing Home Information Available

Learn more about South Carolina nursing homes by ordering "Quality Information Counts. . . What You Should Know about the Quality of Care in Nursing Homes." The brochure is available by calling Brandie 803-731-8225 or 1-800-922-3089 or by E-Mail at bfreeman.scpro.sdps.org. For additional information, visit the Nursing Home Compare web site at www.medicare.gov or call 1-800-MEDICARE (1-800-633-4227).

Wanted: New Subscribers

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Senior Mentor Program Dispels Myths About Growing Old

On the surface they might not seem to have much in common: a 23-year-old woman with a demanding academic schedule and a couple in their seventies who are leisurely enjoying their retirement. Yet medical student Ashley Pollock genuinely enjoys the time she spends with Tom and Jan Ayers as much as the retired Army general and his wife enjoy having her in their home.

When Pollock makes one-hour visits with the Ayers several times a year, she's actually satisfying requirements for her curriculum. Through the University of South Carolina School of Medicine/Palmetto Health Senior Mentor Program, each first year medical student (most in pairs and some individually like Pollock) is matched with a husband and wife or individual senior citizen. Through structured educational modules, students complete assignments each time they meet with their volunteer mentors, who are 65 years of age or older. Assignments can range from taking a medical history to preparing an analysis of a mentor's medications to conducting a frank discussion on advance directives.

Originally implemented with American Association of Medical Colleges/John A. Hartford Foundation grant funding in 2000, the Senior Mentor Program was established to provide medical students with a long-term experience with older adults and to help reduce stereotypes on aging. Though other medical schools have developed similar programs, U.S.C.'s is unique in that the student/mentor relationship extends through the entire four years of school. "By going into a home environment and experiencing how their mentors live, the students are seeing what we hope medicine to be – more holistic," said Ellen Roberts, Ph.D., Associate Director of Geriatric Medical Education and facilitator of the Senior Mentor Program. She added, "Instead of just seeing a patient and learning about their symptoms, they are getting a whole view of a person. This gives them a much better picture of how to take care of an individual."

Caring for South Carolina's Elderly

To Dr. Paul Eleazer, the Senior Mentor Program takes an important step in addressing the health care needs of a rapidly increasing population of senior citizens in South Carolina. An associate professor of internal medicine, Dr. Eleazer is also Director of the Division of Geriatrics and was the principal investigator on the grant that originally funded the program. With fewer than three dozen geriatricians in South Carolina, the job of caring for the elderly in a popular retirement state will fall on family practitioners and internists. "Many people are simply not interested in taking care of older people. My hope is that with a positive experience the

students will want to take care of older people and will be more attentive to their needs," he said.

Pollock has found her experience with the Ayers to be one that has continued to improve over the course of a year. "It's like any relationship. The more time you spend with someone, the more relaxed and open you are," she said. As Pollock asks the couple to report back on health care goals they had set for themselves, the three chat comfortably, obviously quite at ease with each other. "She's like an old friend," Tom said, quickly amending his observation to, "she's really like one of our own grandchildren."

Program Popular with Seniors

The Ayers learned about the Senior Mentor Program from a 98-year-old friend in their retirement community in Northeast Columbia. In fact, a total of seven senior citizens from Wildewood Downs are volunteer mentors, and word-of-mouth has promoted the program so much that at times there is a waiting list for interested seniors. "A bonding developed between the mentors and their students that we couldn't have predicted," said Joshua Thornhill, M.D., Assistant Dean for Clinical Curriculum, who serves as the program's course director with Nancy Richeson, M.D., Assistant Dean for Clinical Assessment.

As Pollock and the Ayers cement the bond they've created, the couple hears about the grueling demands in the second year of medical school, while Pollock learns how retirement means having more time at their disposal, but not having the agility they possessed in their youth. "I used to love getting out in the garden, but if I get down now I can't get up," laughed Jan. While all three are thoroughly sold on the program, Pollock is particularly pleased that it's structured to last through her entire four years of medical school. "It allows the Ayers to follow me all the way through, and makes it appropriate to invite them to events like our white coat ceremony," she said.

When Pollock proudly accepted her lab coat as a symbol that she was progressing from the classroom to a clinical component of her education, the Ayers were there to share that milestone. When she celebrates another momentous day in December, again dressed in white, the Ayers wouldn't dream of missing the occasion as a future physician and radiant bride walks down the aisle.

Reprinted from University Specialty Clinics, *Connections*. April 2003

RECENT PUBLICATIONS

- Adler, G.** (University of South Carolina) & Kuskowski, M. (2003). "Driving Habits and Cessation in Older Men with Dementia." Alzheimer Disease and Associated Disorders, 17(2), 68-71.
- Bauer, M., Rottunda, S. & **Adler, G.** (University of South Carolina) (2003). "Older Women and Driving Cessation." Journal of Qualitative Social Work, 2(3), 309-325.
- Bell, R., Eleazer, G.P., & Krantz, B.E.** (USC School of Medicine) (2003). "Top Blade: An Innovative Approach to Incorporating Geriatrics into a General Surgery Curriculum." Journal of the American Geriatrics Society, 51(4), S111.
- Catoe, H., Sixta, S., & Hajjar, I.** (USC School of Medicine) (2003). "Postural Changes in Blood Pressure and Orthostatic Hypotension in the Elderly: Comparison of Different Antihypertensive Classes." Journal of the American Geriatrics Society, 51(4), S83.
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- Hajjar, I.** (USC School of Medicine) (2003). "Trends in Prevalence, Awareness, Treatment, and Control of Hypertension in the United States, 1988-2000." Journal of the American Medical Association, 290(2), 199-206.
- Hajjar, I. Simpson, D., & Duthie, E.** (USC School of Medicine) (2003). "Structured Interactive Teaching Sessions Using the Audience Response System for GRS Can Improve Geriatric Medical Knowledge." Journal of the American Geriatrics Society, 51(4), S64.
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- Roberts, E.** (USC School of Medicine) (2003). "Use of Older Adults as Teachers for Medical Students: An Overview of Programs Funded Through the Hartford & AAMC Project," Journal of the American Geriatrics Society, 51(4), S156.
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- Tocharoen, T., Hirth, V., & Boland, R.** (USC School of Medicine) (2003). "Prevalence of Dementia and Comorbid Diseases in a Geriatric Outpatient Setting." Journal of the American Geriatrics Society, 51(4), S153.
- Wieland, D.** (USC School of Medicine) (2003). "Contracting Care of Veterans to a PACE Program: Overview of the Millennium Act and the VA Pilot Programs in the All-Inclusive Long-term Care." Journal of the American Geriatrics Society, 51(4).

AGING GRANTS

- Bell, R.M., Krantz, B.E., & Eleazer, G.P.,** (USC School of Medicine). "Increasing Geriatric Expertise in Surgical and Related Medical Specialties," AGS/Hartford Foundation, \$32,000, June 2003 - June 2005.
- Forti, E.M.** (South Carolina Geriatric Education Center). "Geriatric Adult Oral Health Education," HRSA: Bureau of Health Professions, Division of Interdisciplinary, Community-Based Programs – Geriatric Education Centers Supplemental, 2003.
- Fried, L. & Wieland, D.** (USC School of Medicine). "From Bedside to Bench: A Workshop Series to Set National Research Agendas on Pressing Geriatric Issues," National Institutes of Health, 2003-2006.
- Hajjar, I.** (USC School of Medicine). "Geriatric Digital Library," National Institutes of Health National Library of Medicine, \$70,988, 2003.
- Hirth, V.** (USC School of Medicine). "Evaluation of Health Care Utilization and Medication Usage in SC Medicaid Recipients," SC DHHS Bureau of Senior Services, \$8,000, July 2003.
- Hirth, V.** (USC School of Medicine). "Geriatric Grant Award," U.S. Department of Health and Human Services, \$275,000, 2003.
- Hirth, V. & Rowen, R.** (USC School of Medicine). "Developing a Medication Awareness Clinic," DHHS Bureau of Senior Services, \$20,000, July 2003.
- Kinosian, B. & Wieland, D.** (USC School of Medicine). "Modeling Elderly Veterans' Functional Transitions, Total Service Use, and Cross-federal Costs," VA HSR&D Service, 2003-2006.
- Kunkel, M.E., Condraky, M., Timms, J., McGuire, F., Wheeler, A.P., & Haliena, R.** (Clemson University). "Using Interdisciplinary Students Teams to Provide Nutrition and Exercise Education to Elderly South Carolinians," Clemson University, Provost Innovation Fund Award, 2003.
- Matthews, M.** (USC School of Medicine). "Geriatric Academic Career Award," U.S. Department of Health and Human Services, \$250,000, 2003.

BOOK CHAPTERS

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University of South Carolina
South Carolina Center for Gerontology
DeSaussure College
Columbia, SC 29208

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