

CENTRE ON AGING NEWS

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Centre on Aging

The Centre on Aging, established on July 1, 1982, is a university-wide research centre with a mandate to conduct, encourage, integrate, and disseminate research on all aspects of aging.

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Canada Research Chair in Healthy Aging
Professor, Community Health Sciences,
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The Centre on Aging News is published three times a year and is available on our web site and by request. Direct comments and inquiries to

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Aging around the world and at home

The Centre on Aging will be hosting its 31st Annual Spring Research Symposium over two days on Bannatyne Campus. Join us May 5–6, 2014, as this year’s symposium theme *Aging around the world Aging in a new homeland*, will take a global perspective on aging at home and abroad.

May 5, 2014 presentations

On Monday, several international presenters will take part in this year’s symposium:

- **Dr. John Beard**, Director, Department of Ageing and Life Course, World Health Organization (WHO), will present live via video conference on *Global aging perspectives from the World Health Organization*.
- Joining us from Nigeria, **Dr. Emem Omokaro**, Executive Director, The Dave Omokaro Foundation will share her experiences on *Aging in Nigeria*
- Serving as panel moderator, **Dr. Jane Barratt**, Secretary General, International Federation on Ageing, will engage several international students studying in the area of aging at the University of Manitoba, to share their first-hand experiences on what it means to age in their home country.



Photo credits: Adam Jones, Ph.D. | Global Photo Archive; thedesignspace.net | Creative Commons 2.0

In addition to looking at aging from the global perspective, this year's symposium will also look at how a diverse, multicultural older population is aging in Manitoba. The afternoon plenary session will discuss how *One size does not fit all—Meeting the needs of aging immigrants*. Panel presenters include

- **Anahita Aminian**
- **Dana Mohr**, Regional Manager, WRHA French Language Services
- **Maureen Keelan**, Manager, Entry Program for Older Adult Immigrants, A&O: Support Services for Older Adults
- **Lori Wilkinson**, Ph.D., Associate Dean and Professor, Dept. of Sociology, University of Manitoba
- **Sau Leng Wong**

Panelists will discuss some of the difficulties older immigrants and their families face in their new homeland, and some of the services that are available for immigrant seniors.

The first day will conclude with three concurrent sessions

- *Breaking down cultural barriers: Connecting with older immigrant seniors in the community*
 - * **Gorjana Radulovic**, Volunteer, Entry Program for Older Adult Immigrants, A&O: Support Services for Older Adults
 - * **Susan Sader**, Executive Director, Good Neighbors Active Living Centre
- *Take care—Older immigrants and accessing health care services*
 - * **Shahnaz Naghipur**, Founder/Owner, Companion Care
 - * **Tara-Lee Procter**, Director, Home Care, Winnipeg Regional Health Authority (WRHA)
- *Why oral history? Voices of Winnipeg's former refugees and displaced persons of post-WWII Europe*
 - * **Elizabeth Krahn**, MSW, RSW, Research Assistant, Stories of Homeland, Violence, and Migration: Memories and Histories of Refugees in Manitoba, 1945 to the Present

May 6, 2014 workshops

New to the symposium this year is a half-day workshop that will be held on Tuesday morning to allow in-depth

discussion among interested participants in three topic areas, as they affect older immigrants:

- social engagement and leisure activity participation;
- health care; and,
- housing.

The purpose of the discussion is to

- identify good examples of programs that are already in place in Manitoba;
- identify gaps in programs; and
- determine possible solutions to promote change.

A note about the workshops

Discussions in the workshops will be facilitated and note takers will be available. **The workshop discussions will be compiled into a report to be published by the Centre on Aging.** The report will be widely distributed to organizations and the public, with the hope that it will help to enhance services for older immigrants in Manitoba.

Full symposium details

Registration and full presentation descriptions for the symposium are available on the Centre's Web site: umanitoba.ca/centres/aging/events/384. Registration forms can be returned to the Centre

- by email to coaman@umanitoba.ca
- by fax to (204) 474-7576
- by mail to
Centre on Aging, University of Manitoba
338 Isbister Building
Winnipeg MB R3T 2N2

Lunch is available for \$10 and will be available in the Joe Doupe Concourse. Please indicate on the registration form if you will be attending and your method of payment.

Late registrations

Registrations will be accepted at the Centre until **April 25, 2014**. After this date, symposium attendees are requested to register in person at the registration desk as Centre staff prepare for the symposium.

Research Fellowship recipients, 2014–2015

The Centre on Aging Research Fellowship is designed to support aging-related research in any discipline and is open to all University of Manitoba faculty members. Since 1993, 36 fellowships have been awarded to individuals across 10 faculties at the University of Manitoba.

This year, the Centre on Aging has awarded two fellowships. Congratulations to **Dr. Enrique Fernandez**, Associate Professor, Department of French, Italian, and Spanish, Faculty of Arts; and **Dr. Miyoung Suh**, Associate Professor, Department of Human Nutritional Sciences, Faculty of Human Ecology. In addition to receiving the fellowships, Dr. Fernandez and Dr. Suh are also the Centre's newest Research Affiliates.

Dr. Miyoung Suh

Screening retina function in relation to eye health nutrients in aging population

The ultimate goal of Dr. Suh's research is to improve the eye health of aging Canadians by finding simple strategies to prevent age-related vision deterioration and to reduce overall visual insufficiency and blindness. Many older adult populations are challenged with age related diseases such as age-related macular degeneration (AMD) and related blindness. In fact, 65% of individuals over the age of 50 have some form of visual impairment. AMD alone is responsible for 46% of severe cases of visual loss in individuals over 40 years of age. Unfortunately, there is currently no cure for the advanced forms of AMD suggesting that preventative strategies might be the best option to reduce the impact of AMD.

The retina is a light accepting organ that requires unique biomolecules for its structural integrity and optimal functioning (highly enriched with specific fatty acids such as docosahexaenoic acid (DHA)) and also to protect the organ itself from light induced damage (carotenoids-lutein and zeaxanthin). Evidence has demonstrated that the above molecules can be altered through dietary interventions and to a greater extent with supplementation trials. However, few studies have demonstrated whether the biochemical changes in fact lead to functional changes. It is of interest to understand the current retinal health of older adults in terms of their retina function (rod and cone function) and the above eye related molecules. The results of this study will contribute to the development of valuable prevention strategies for eye health and individuals at risk of developing AMD.

Dr. Enrique Fernandez

Reclaiming active aging in early modern literature: Don Quixote's adventures (1605) and Teresa of Avila's autobiography (1567)

By reclaiming much older texts than the ones normally discussed, which are mostly taken from the 20th century, this project will enlarge the corpus of literary texts whose protagonists exemplify active aging. The analysis of two representative early modern Spanish books will demonstrate that texts from other periods and cultures can be part of the readings recommended for discussion in the programs of active aging. This will result in a widening of the readings in active aging programs, making them more historically and culturally varied. Furthermore, a prehistory will be added to the discussion of the concept of active aging. I chose two texts from the conservative and repressed early modern Spain, where the officially sanctioned vision of old age was that of preparation for imminent death. The reason for my choice is that, if the existence of a proactive aging discourse is shown to exist in such unlikely environment, we can assume that similar texts can be found in other periods and places.

Properly analyzed, Don Quixote (1605) and Teresa of Avila's autobiography (1567) contain alternatives to the official vision of aging as a period of ailing, inactivity, and preparation for death. This morbid conception of aging was however not openly confronted by the two authors, who could not risk mounting a frontal attack. While seemingly playing allegiance to the officially recommended model of aging, they were in reality offering attractive models of old age as a period consecrated to pursuing new projects and personal growth.

Dr. Enrique Fernandez continued on page 4....

Graduate Specialization in Aging recipient

Earlier this year, Shayla Welwood became the 13th person to receive the Graduate Specialization in Aging (GSA) certificate from the Centre. Shayla received her Master's of Science Degree from the Department of Family Social Science, Faculty of Human Ecology. Shayla's advisor was **Dr. Kerstin Roger** and **Dr. Laura Funk** was a committee member.

The following is a summary of Shayla's thesis.

University students perceptions of financial abuse of older adults

This study explored university students' perceptions of financial abuse of older adults. A quantitative survey was used to gather a baseline of knowledge that the sampled students had regarding the topic. A total of 217 students completed the survey. A total of 211 students (97.2%) identified that they had heard the term abuse of older adults before and of those, 76.9% of students had heard about abuse of older adults on television. It was found that the students who completed the survey did have an overall understanding about the topic.

Following the survey, 10 students were interviewed. This study also wanted to examine if culture and ethnicity had an effect on the perceptions the students had. Therefore, the students for the interviews were chosen based on ethnic background to allow for a diverse sample. The students interviewed provided insight into how ethnicity and culture, family dynamics, and individual traits can affect the perceptions one has on abuse of older adults. It was evident that the participants had a difficult time defining what financial abuse is, as there are many factors at play.



Shayla Welwood receives her Graduate Specialization in Aging certificate from Centre Director, Dr. Verena Menec

Participants also found it difficult to reflect on their own cultural practices, instead finding it easier to discuss cultures other than their own. From the interviewed participants, there were two major findings.

First, it was identified that all of these students had seen the Government of Canada commercials on abuse of older adults, and felt they were beneficial. Second, the topic of entitlement/expectance came up frequently. Participants identified that they believed that perpetrators were driven to commit financial abuse of older adults because they felt entitled to the money, or expected some compensation for care being provided.

For more information on the GSA, visit umanitoba.ca/centres/aging/students/582.

Dr. Enrique Fernandez continued from page 3....

Thus, Don Quixote is cautiously presented by Cervantes as an insane old man who, driven out of his mind by excessive reading, leaves his comfortable home to become an itinerant knight. However, his many voyages cannot but be read as extolling activity in pursuit of an ideal, regardless of age. Similarly, Teresa of Avila's autobiography appears to be the pious narrative of her exemplary life, in which her continuous journeys

through Spain are presented as religious pilgrimages, plagued by the near-ascetic discomfort that traveling implied at the time. However, the details and the often-celebratory tone in her descriptions of the journeys, the people she meets, and the places she visits offer an attractive alternative to the restricted life to the life officially prescribed to those of her age and gender.

Spotlight on research: Research affiliate profiles



Editor's note: During the summer of 2013, the Centre on Aging had a student volunteer interview a number of Affiliates about their research. These are the final articles of the Research affiliate profile series.

Arman Iranpour started Grade 11 in September 2013 and is an International Baccalaureate student at Kelvin High School. He is actively involved in sports and volunteer activities. As part of his studies, he completed community service work by volunteering. During the month of July 2013, Arman interviewed Centre on Aging research affiliates about their research interests.

Dr. Robert Tate

by Arman Iranpour

Dr. Robert Tate is a Professor in the Department of Community Health Sciences and the director of the Manitoba Follow-Up Study. The Manitoba Follow-Up Study is one of the longest running health studies ever conducted. Dating back to 1948, 3,983 men from across Canada were enrolled in the study, with the intention being to follow their health as they aged. After 65 years, about 400 of the original cohort are still alive, now at a mean age of 91 years. Through mailed surveys distributed each year, researchers are able to collect information about the mental and physical health and wellbeing of the individuals enrolled. Co-investigators and researchers working on this study come from many diverse fields including nutritional sciences, psychology, biostatistics, internal medicine and medical rehabilitation. The current overall aim of this study is to look at who is living healthy and active and aging successfully.

When asked how he initially got into the field, Dr. Tate said after he had finished his master's degree, in statistics in 1975, he began his career at the University of Manitoba in a support staff position, as a data analyst, and later as a biostatistical consultant. Upon completion of a Ph.D. in Community Health Sciences in 2000 he moved into an academic position. Hence, his whole professional career has been with the same department of the same University.

Through working on several different projects, he was able to become a permanent staff member, and that's where his career in the field started. He became the director of the Manitoba Follow-Up Study in 2001, which he is still working on today. Dr. Tate believes that the research he is currently doing will affect younger generations by becoming more educated on how the decisions they make early in life will affect their future health.

When asked what motivates him, Dr. Tate said that he believes the field of research he is working in will make a huge impact nationally and globally. He also said that he works with exciting people that make it worthwhile.

Dr. Jonathan Marotta

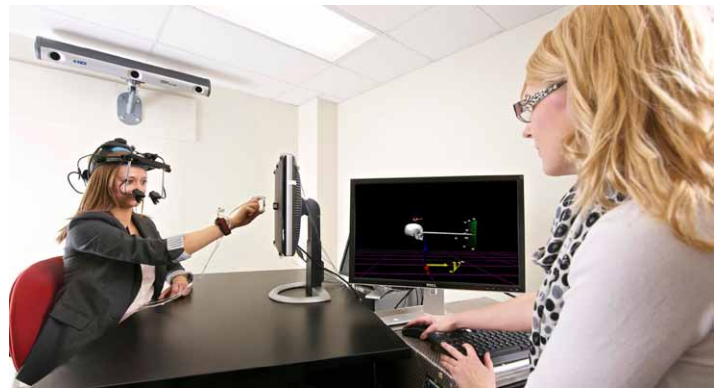
by Arman Iranpour



Dr. Jonathan Marotta is a Professor in the Department of Psychology and the Director of the Perception and Action Laboratory (www.perceptionandaction.com). He received his Ph.D. in Neuroscience from the University of Western Ontario. He currently studies the brain's visual system, while teaching behavioural neuroscience. His research covers how vision is used to perceive the world around us and guide our actions. He is particularly interested in how vision and visuomotor control are affected by neural damage.

Dr. Marotta conducts his research in the Perception and Action Laboratory at the University of Manitoba. He uses "specialized motion tracking systems to reconstruct the movements of an individual's fingers, hand, arm and eyes during a reach." Dr. Marotta also uses functional magnetic resonance imaging to study the brain. Through physical and cognitive tests, Dr. Marotta is able to collect information and data from clients.

Dr. Marotta believes that his research may lead to the development of better, more effective treatments for vision- and visuomotor-impairing injuries. Through studying the damaged brain, Dr. Marotta is able to learn more about the healthy brain. He hopes to be able to combine physical and cognitive rehabilitation, which could make treatment more effective and less expensive. He also aims to generally promote science through his research and lab work.



Students demonstrate how the specialized motion tracking system is used in Dr. Marotta's lab

When asked how he got into the field initially, Dr. Marotta said that he was interested in sensation and perception while completing his undergraduate degree. He first worked with animals, but later found that he was more interested in human research. Dr. Marotta is pleased with his job and said that it's the "quest for knowledge" that keeps him going. He pointed out that "it's hard to be bored because you can always ask more questions". He enjoys talking about and presenting his research, and said that he wouldn't do it if he didn't enjoy it.

Reference

¹ www.perceptionandaction.com/visuomotorControl.asp

Dr. Malcolm Doupe

by Arman Iranpour



Dr. Malcolm Doupe is an Assistant Professor in the Department of Community Health Sciences, Faculty of Medicine, a Senior Research Scientist with the Manitoba Centre for Health Policy, and Director of the Western Regional Training Centre. He has recently completed a study called *Population aging and the continuum of older adult care in Manitoba*.¹ This study looks at the range of housing and care options available to older Manitobans and identifies people who use these services, helping decision makers to decide if people are getting the right type of care when they need it. Dr. Doupe's overall program of research has value for providing evidence to help guide health care reform strategies in Manitoba. He has presented his research findings to several local and national groups, and has led many discussions about strategies to reform older adult care.

Dr. Doupe conducts his research at Manitoba Centre for Health Policy, using population-based health care use records. Most of his work focuses on personal care homes and emergency departments, measuring different utilization patterns, quality care, and health care use projections.

As Director of the Western Regional Training Centre (WRTC), Malcolm also trains graduate students to conduct health services research in ways to best meet the needs of decision-makers and health-care policy makers. Through the WRTC, graduate students are able to understand the types of evidence that decision makers want, and the policy implications of their work.

Reference

- ¹ Doupe M, Fransoo R, Chateau D, Dik N, Burchill C, Soodeen R, et al. (2011). *Population aging and the continuum of older adult care in Manitoba*. Winnipeg, MB: Manitoba Centre for Health Policy.

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CENTRE ON AGING RESEARCH DATABASE

ARE YOU INTERESTED IN PARTICIPATING IN AGING-RELATED RESEARCH STUDIES?

The year 2011 marked a significant turning point. It was the year the first wave of baby boomers turned 65. By 2036, it is projected that there will be more than 130,000 Manitobans aged 65 and over. As the demographics continue to change, the needs and wishes of those who are aging become more important. Researchers are often looking for participants for their research studies. The Centre on Aging, University of Manitoba, has created an electronic database of individuals 55 years and over who are willing to be contacted by researchers about whether they would like to participate in aging-related studies.

We would like to invite you to become part of this database. The database would contain your name, mailing address, phone number, age, and gender. It is maintained by Centre on Aging staff.

By becoming part of the database, you are only consenting to being contacted by researchers, whether you actually participate in a study is entirely your choice. Research projects and requests for participants vary. You can opt to have your information removed from the database at any time.

Your contact information will only be shared with Centre on Aging researchers whose projects have been approved by a research ethics board at the University of Manitoba.

To become part of the database:

- Call 204.474.8746 or email bcmanitoba@umanitoba.ca at the Centre on Aging to find out more about becoming a research participant.
- Fill out the online form <http://umanitoba.ca/centres/aging/involved/index>

For more information, visit umanitoba.ca/centres/aging

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Be part of the research!

Did you know that the Centre on Aging established a participant research database? Participants who sign up must be age 55 years and over, be willing to be contacted by researchers for future aging-related studies, and provide basic contact information.

By becoming part of the database, you are only consenting to being contacted by researchers; whether you actually participate in a study is entirely your choice. Research projects and requests for participants vary. You can opt to have your information removed from the database at any time.

Your contact information will only be shared with Centre on Aging researchers whose projects have been approved by a research ethics board at the University of Manitoba. For more information or to participate, contact the Centre on Aging or complete the online form: umanitoba.ca/centres/aging/involved/index.

Research affiliate updates

Media

Dr. Richard Milgrom was featured in the most recent issue of *ResearchLIFE*, a University of Manitoba publication (Winter 2014 issue). In the article, Dr. Milgrom discusses the challenges of developing age-friendly communities locally from a city planners' perspective. Dr. Milgrom was a co-investigator on the SSHRC funded Age-Friendly Communities CURA project housed at the Centre on Aging.

Dr. Verena Menec was interviewed for the supplement *The Prime News*, recently published in community newspapers. In the articles (*Our housing needs change with age* and *Support is available for "aging in place"*), Dr. Menec is asked about issues older adults face as they relate to housing needs.

As the Manitoba site co-principal investigator, **Dr. Menec** is also profiled in the CLSA *Meet the researchers* series, where she discusses the research being conducted by CLSA researchers in Manitoba. The video is available at www.youtube.com/watch?v=S6Xt2m0Ce_I.

Upcoming presentations

The Health, Leisure & Human Performance (HLHP) Research Institute and Centre on Aging are co-sponsoring the HLHP's final seminar of the academic year on **March 28, 2014**. Dr. Sean Horton, University of Windsor, will present *Getting it and keeping it: Skill acquisition and maintenance through the lifespan*. The seminar will take place

2:30 pm
136 Frank Kennedy Centre | Fort Garry Campus

For more information, contact hlhp@umanitoba.ca or call 204.474.7087.

Dr. Michelle Lobchuk, RN and co-author Fran Rosenberg, RN, BN, GNC(c), CRN(c), Riverview Health Centre will present *Urinary Incontinence Quality of Life: Affected individual and caregiver perceptions* at the Faculty of Nursing and the Manitoba Centre for Nursing and Health Research seminar series on April 2, 2014.

For more details on the seminar, visit umanitoba.ca/faculties/nursing/mcnhr/events/Research%20Seminars.

Dr. Gina Sylvestre, University of Winnipeg will be presenting *Undoing the digital boundaries of spatial analysis: geographic knowledge through experiencing, valuing and moving in space* as a guest speaker at the Qualitative Research Group upcoming presentation on April 7, 2014.

Recent presentations

On November 7, 2013, **Dr. Mary Shariff** and **Dr. Verena Menec** were panel participants in a public presentation *Policy and death: What the right to die means for lawmakers, healthcare providers and citizens*. The event was hosted by the Manitoba Institute for Policy Research (MIPR) and co-sponsored by the Centre on Aging and the Centre for Professional and Applied Ethics.



(left to right) Prof. Arthur Schafer, Centre Research Affiliate Dr. Mary Shariff, Centre Director, Dr. Verena Menec, and Dr. Peter Markesteyn were panelists at the MIPR public presentation

Publications

Barclay, R. & Tate, R.B. (2014). Response shift recalibration and reprioritization in health-related quality of life was identified prospectively in older men with and without stroke. *J Clin Epi*. <http://dx.doi.org.proxy1.lib.umanitoba.ca/10.1016/j.jbbr.2011.03.031>.

Norton, P.G., Murray, M., **Doupe, M.B.**, Cummings, G.G., Poss, J.W., Squires, J.E., et al. (2014). Facility versus unit level reporting of quality indicators in nursing homes when performance monitoring is the goal. *BMJ Open*. 12;4(2):e004488. doi: 10.1136/bmjopen-2013-004488.

Healthy mouth, healthy life

by Rachel Ines

Practicing good oral health is more than just having healthy teeth and gums; it is also tied into our social connections, how we eat, socialize, and feel physically. Over 50 people came out on December 11, 2013 to hear panel members discuss oral health care treatment from the perspective of a dentist in private practice, Dr. Margot Pilley; a dentist in a community health clinic, Dr. Khalida Hai-Santiago; and a dental hygienist working in a community program through the University of Manitoba's Centre for Community Oral Health, Ms. Mary Bertone. The session was moderated by Centre Director, Dr. Verena Menec.



The importance of oral health

"Good oral health is predicated on the health of both hard and soft tissue in teeth", said Dr. Pilley. But as we age, oral health becomes complicated. Ms. Bertone added that older adults face a higher risk of oral health issues and that these issues can impact the older adult's general health, as physical health can be connected to oral health issues.

Education is one way of building awareness on the importance of good oral health. The Manitoba Dental Association has developed an advertising campaign to build awareness of the benefits of good oral health and to identify how early interventions at every age group can minimize risk prevention.

Accessibility of oral health care and treatment

Most working people have some type of dental benefits; however, there may be some financial or other type of barrier that prevents people from accessing basic oral health treatment. For many seniors and those with mobility issues, the problem may be just trying to get into or moving around the building. As Dr. Pilley identified, the building design can impact accessibility in more than one way.

After retirement, many older adults will no longer have insurance to maintain their oral health, while others will opt to take on extra or private insurance. Dr.

Pilley identified that as people near retirement in the workplace and begin to prepare for their retirement, part of their plan should include examining treatment for their teeth while they still have some kind of coverage. Dr. Pilley cautioned audience members to review their recent past of oral health treatment to ensure that an individual's monthly contribution will not exceed what they have used in the past.

For older adults with low incomes, the cost of treatment is measured by how much the older adult can afford to pay. Dr. Hai-Santiago spoke of her experience working at Mount Carmel Clinic and identified some of the requirements that must be met for older adults to access oral health treatment:

- they cannot have any dental insurance;
- they must show their T4 slip;
- they can only receive specific treatments: x-rays, fillings, extractions, general treatments; and
- they must pay a set fee per visit.

For these older adults, the Mount Carmel Clinic fills a crucial role in maintaining their oral health care, with appointments booked up to six months in advance.

At the University of Manitoba, the Centre for Community Oral Health provides oral health care services to underserved populations in the community. This includes providing treatment to older adults in their home or visiting older adults in long term care facilities or hospitals through the community outreach program.

Healthy mouth, healthy life continued on page 10...

Healthy mouth, healthy life continued from page 9...

The Centre for Community Oral Health has also teamed up with the PRIME program at Deer Lodge Centre, to provide education sessions and oral health screening.

Building awareness of geriatric dentistry

Similar to the field of geriatrics, nationally there are a limited number of specialized dentists and hygienists in the area of geriatric dentistry. Currently, dentistry students are given an opportunity as part of their externship rotation to take part in a five week geriatric clinical rotation through the Centre for Community Oral Health. However, to pursue additional training in geriatric dentistry, students would need to complete additional training outside Manitoba.

One area where building awareness can be addressed is through interprofessional (IPE) education teams. Interprofessional education brings practitioners from a variety of disciplines (medicine, nursing, pharmacy, physical therapy, etc.) to come together and work together, thereby providing the best care for a patient.



Both Ms. Bertone and Dr. Hai-Santiago emphasized that having student trainees' work in multidisciplinary teams would be beneficial, as the more health professionals involved the better.

Following the panel presentation, the floor was opened for audience questions and attendees were invited to a general reception.


CLSA updates

by Audrey Blandford, CLSA Manitoba Data Collection/CATI Site Coordinator

The Tracking Component (telephone interviews) of the Canadian Longitudinal Study on Aging (CLSA) has been up and running in Manitoba since September, 2011. The team of telephone interviewers are working diligently to wrap up the baseline interviews by April, 2013. To date, the CLSA telephone interviewers have completed 3,771 baseline interviews (60 minute interviews) with individuals from Manitoba, Saskatchewan, Alberta and British Columbia. In addition to the baseline interviews, the team has been working on calling those people in which it has been 12-18 months since their initial (baseline) interview. This started in October 2013 and to date just over 800 interviews have been completed.

The Comprehensive Component of the CLSA, run out of Deer Lodge Centre, is working hard to complete the goal of recruiting 3000 individuals aged 45 to 85 living in Winnipeg into the study. To date, the in-home interviewer team has completed 1825 in-person interviews. Just over 1600 of these individuals have also completed their two and half hour visit to Deer Lodge where additional physical measurements (e.g. height, weight, blood pressure, hearing and vision tests), a bone density scan and tasks related to memory and concentration are done.

CLSA Manitoba by the numbers

 **3771**
Completed phone interviews

 **1825**
Completed in-home interviews

 **1600**
Visited Deer Lodge site for physical assessments, etc.

Students Targeting Aging Research (STAR)

by Rachel Ines

In September, 2013, the Centre on Aging began hosting a networking group for University of Manitoba students who are focusing their studies on aging. The initial Students Targeting Aging Research (STAR) meeting brought together students from seven different faculties and departments across the University.

While the Centre provides administrative support to the STAR group, two graduate students serve as co-leads for the group: **Cara Brown**, who is a doctoral student in the Department of Community Health Sciences; and **Catherine Marshall**, who is a master's student in the Department of Human Nutritional Sciences.

For Cara, having the STAR group is important “so students from all areas of study at the university can come together to share their ideas and learn about each other’s work and perspectives around aging.” STAR provides a “venue where we can encourage each other in our efforts and foster relationships.”

Having peers who have a common interest has been a positive experience for Catherine. “The STAR group is a great way to connect with other students that share an interest in aging. Students who are interested in aging (or doing aging research) are spread all over campus, in various faculties and disciplines, so it’s nice to have a platform in which we can all come together. It’s a great chance to not only talk about aging-related topics, but to hear how the different disciplines view, interpret, and respond to the various issues.”

Gerontology is a multidisciplinary field. “Individual and population aging is something that affects all the disciplines—medicine, pharmacy, nursing, occupational

therapy, physical therapy, dietetics, social work,” says Catherine. “It’s really neat that we have students from most of those areas involved in our group.”

The meetings and meeting topics are driven by the STAR students, based on their diverse interests. Since the initial meeting, students have met eight times where several students have led journal clubs or hosted a seminar; heard presentations from two of the Centre’s Research Affiliates about their personal interest in aging; and learned about the research being conducted through the Centre.

“So far, the STAR group has opened my eyes to issues of global aging, ageism, and aging issues for women, among others”, says Catherine. “I’ve also enjoyed learning from the researchers who have come to our group to share their experiences in the aging field. Every meeting is different—whether we have a guest speaker or are simply discussing a journal article—there’s always something interesting to discuss. The discussions have been thought-provoking and stimulating.”

“The STAR group helps keep my passion for aging research alive,” says Cara. “When I meet with the STAR members, I am inspired by their enthusiasm, ideas, and vision—it is invigorating. I have also learned that even though everyone has different perspectives, we all just want to create a world that is free of ageism.”

University of Manitoba students who are interested in learning more about the STAR group or would like to join the meetings can contact the Centre at coaman@umanitoba.ca.

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Don’t forget, the Centre on Aging is on facebook!

Visit our page to find out the latest information on Centre events, research, and important issues on aging: www.facebook.com/CentreOnAging.umanitoba



Research forum: April 25, 2014

Join the Centre on Aging as we welcome Dr. Walter Wittich, who will be presenting *Overcoming the challenge of rehabilitating older adults with combined vision and hearing loss*.

April 25, 2014
12:00–1:00 pm
Rm 164 Apotex Centre | 750 McDermot Avenue |
Bannatyne Campus

Dr. Walter Wittich, Chercheur d'établissement, CRIR
responsable du site & coordonnateur de recherche
clinique, MAB-Mackay Rehabilitation Centre

Presentation abstract

It is a general assumption among many of us when we interact with others that we can see and hear each other. Audio-visual communication is an omnipresent component in how we live our lives. However, this assumption may not be correct when we consider normal age-related changes in vision and hearing, and becomes even more flawed in the presence of age-related sensory impairments caused by macular degeneration, presbycusis, glaucoma, etc. In the context of rehabilitation for combined vision and hearing loss, use and usability of assistive communication technologies (e.g. amplified telephones) becomes problematic because of the "other" impairment.

The presentation will focus on challenges that arise in the rehabilitation of individuals with dual sensory impairment, their use of technology and their interaction with rehabilitation professionals.



Presenter bio

Dr. Walter Wittich is the resident researcher at the MAB-Mackay Rehabilitation Centre in Montreal, Quebec. Following his Master's in Psychology (Concordia University) and a PhD in Visual Neuroscience (McGill), he completed a postdoctoral fellowship in audiology at the Centre de Recherche Institut Universitaire de Gériatrie de Montréal. Coming from a background in age-related vision loss, he now conducts research in dual sensory impairment and acquired deaf-blindness. His research domains include basic sensory science, as well as medical, psychosocial, and rehabilitation approaches to sensory loss. He recently became a Fellow of the American Academy of Optometry and is Quebec's first Certified Low Vision Therapist.

RSVP if you will be attending

Due to limited seating, please **RSVP by April 18, 2014** if you would like to join us for the presentation:
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