

AREA OF EMPHASIS SCHOLARS

aging and gero- social work

**JUNE
2024**

Coordinator Welcome from Tanya Rand, Ed.D, MSW, LICSW

Welcome to the 2023-2024 AEA newsletter and our program! The [AEA program](#) helps prepare students to provide culturally responsive whole-person care to older adults and their families. As you will read in our newsletter, the 23-24 academic year has been full of growth-promoting engagement, vital skill building, and meaningful leadership development. In end-of-year reflection, I am filled with a lot of pride and gratitude for our scholars, our alumni, and our program!

We have many congratulations this year! Congratulations goes out to our graduating scholars, Leticia Ahianyio who completed her clinical internship with Monarch Health Care at the Estates St. Louis Park and Aralee Derflinger who completed her clinical internship with Andrew Residence. Congratulations also goes out to one of our AEA Alumni, Dr. Sungwan Cho who is now teaching as an Associate Professor in the School of Social Welfare at the Catholic University of Korea. Please take a moment to read a beautiful story written about him [Blending Faith and Social Work for Older Adults](#). And finally, congratulations to Diane Bauer, MSW, LICSW and UST faculty Emeritus who received our 2024 AEA Lifetime Engagement Award.

We'd like to also acknowledge a special thank you to Dr. Ande Nesmith, our School of Social Work Director and Dr. MayKao Hang, our Dean of the Morrison Family College of Health whose support have made the AEA program and this year possible. Last, but not least, a very special thank you to Jenna Kress, AEA scholar for not only serving as the editor for the newsletter this year, but also for providing several contributing articles!

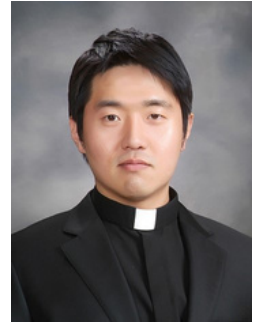
The need for more social workers prepared to work in the gero-practice field has never been greater! If you'd like to learn more about how you can partner with us to increase the capacity and reach of the AEA program, please reach out to: Dr. Tanya Rand @ tjrand@stthomas.edu.



Tanya Rand, Ed.D, MSW, LICSW



Diane Bauer, MSW, LICSW



Sungwan Cho, Ph.D



Graduating AEA scholars: Leticia Ahianyio and Aralee Derflinger

A YEAR IN REVIEW



Photo of AEA scholars past and present at the AEA Workshop event

23-24 AEA Summary

by Jenna Kress

The past year has been an enriching journey for AEA scholars as we engaged in many learning experiences and professional development opportunities.

Scholars participated in various workshops, conferences, and initiatives that provided valuable opportunities to build gero-practice knowledge and skills. Notable events included the Minnesota Gerontological Society's Conference, the Morrison Family College of Health's Interprofessional Education Workshop, the Whole Person Health Summit, the Minnesota Coalition for Death Education Conference, the Minnesota Hospice and Palliative Care Conference, UST receiving an Age-Friendly Minnesota Community Grant, and our end of the year AEA Workshop and Celebration. This year has been marked by growth, learning, and a deepened commitment to improving the lives of older adults across populations. We look forward to continuing this important work in the coming year!



Photo of AEA Scholars at the MNHPC Conference



AEA Scholars and Tanya at the AEA Workshop Event

AEA Workshop and Celebration

Event Summary by Jenna Kress

This year we hosted The Area of Emphasis in Aging Workshop and Celebration, with current AEA scholars, Dr. Tanya Rand, our AEA advisor, and supported by wonderful staff members from the Morrison Family College of Health.

Living Well with Ambiguity at End of Life: Loss, Grief, Hope, and Future Stories."

This continuing education workshop featured an insightful talk by Dr. Melissa Lundquist, a professor at the University of St. Thomas, and Ted Bowman, a grief educator. The talk began with a powerful reminder that humans are storytellers. Bowman and Lundquist addressed the inevitable presence of loss and grief in human stories, quoting Rosalynn Carter: "There are only four kinds of people in the world: Those who have been caregivers, those who are currently caregivers, those who will be caregivers, and those who need a caregiver." They shared touching stories about the realities caregivers face, underscoring the importance of grief-informed practice.



Melissa Lundquist, Ph.D., LISW and Ted Bowman, MDiv

Careers in Aging Panel

Following this presentation, we hosted a Careers in Aging panel featuring AEA alumni Carol Ashwood, MSW, LICSW, Florence Wright, MSW, LICSW, Beth Brown, MSW, LICSW, and Judy Johnson, MSW, LICSW. The alumni shared valuable advice, especially for future social workers. One panelist highlighted the variety and diversity of daily work as the most enjoyable aspects, while another emphasized the critical need for more specialists in aging, especially as demand continues to grow. The discussion also touched on the importance of self-care and the assurance of job security in this field, given the current shortage of professionals.



Florence Wright
Palliative Social Worker



Carol Ashwood
Caregiver Consultant



Beth Brown
Bereavement Counselor



Judy Johnson
Lead Hospice Social Worker

Lifetime Engagement Award

After these presentations, the event celebrated AEA graduating scholars Aralee Derflinger and Leticia Ahianyo, whose stories are featured in this newsletter. The AEA Lifetime Engagement award was presented to Diane Bauer, MSW LICSW the former Coordinator of the AEA program at the University of St. Thomas. Diane's profound impact as an educator and advocate within the aging field was honored through heartfelt words shared by her former students and AEA alumni, Florence Wright, MSW, LICSW and Kelli Kinney, MSW, LICSW.



Kelli Kinney, Diane Bauer and Florence Wright

Spotlight Section

Graduate Spotlight

Leticia Ahianyó

Leticia's passion for working with older adults started with her own experiences with her aging parents, it was this personal experience that opened her eyes to the growing unmet needs of older adults. Leticia hopes to use person-centered approaches to assist older adults. She is strongly committed to ending abuse and discrimination.

Leticia's foundation internship was at Open Circle Adult Day where she co-facilitated caregiver support groups, assisted in care planning and provided one-on-one support for clients and families within the program. Her clinical internship was with Monarch Health Care at the Estates St. Louis Park, in this role she was able to provide emotional support and gain valuable skills providing interdisciplinary treatment planning for clients using a trauma-informed strength based and systems approach.



Leticia Ahianyó

Aralee Derflinger

Aralee's choice to work with older adults stems from her personal life, where she grew up in an intergenerational household. This upbringing exposed her to the complexities and challenges faced by older adults, fueling her passion to pursue a career that makes a significant impact in this area.

Aralee completed her foundation internship at Daily Work providing employment-focused case management for immigrants and refugees. During her clinical year at Andew Residents, Aralee provided support to older adults with severe and persistent mental illness living in a residential setting. Aralee is passionate about end of life and integrated behavioral health care. After graduation Aralee plans to pursue work in these areas.



Aralee Derflinger

Funding Spotlight: Age-Friendly Minnesota Community Grant

by Jenna Kress and Tanya Rand

As a graduate research assistant, I worked with faculty, staff and community members on a grant the University of St. Thomas received from the Age-Friendly Minnesota (AFMN) Grants Program.

In response to our state's quickly changing demographics, in 2019, Minnesota Governor Tim Walz signed an executive order to establish an Age-Friendly Minnesota Council to make aging in Minnesota a statewide strategic priority. Later, in 2022, Governor Walz applied to the AARP Network of Age-Friendly States and Communities, and at that time, Minnesota became the 10th state to join the network.

Committed to making diversity, equity, inclusion, and accessibility (DEIA) the foundation of AFMN, the AFMN Council launched the AFMN Grants Program to help communities initiate or advance age-friendly efforts. The University of St. Thomas was one of the grant recipients. This two-year grant will help UST create innovative health and social service-learning opportunities to promote workforce development in the field of aging, increase the visibility of the Selim Center, pilot an intergenerational conversation series, provide training on age-inclusivity, and explore age-friendly university principles.

We have been busy in our first year! We conducted an environmental scan of the university's current programs and practices and found numerous strengths that can provide a foundation for future age-friendly initiatives. This scan was followed by a survey of our staff, faculty, and lifelong learners from the Selim Center, gathering their insights on current campus practices and attitudes toward aging. To deepen our understanding, we have begun to host focus groups with with some of our students who are Veterans, with our Area of Emphasis in Aging UST alumni who work in various aging-related fields, Selim Center students, and BIPOC faculty members. These initial activities have been invaluable in shaping our next steps. More to come in year two of our grant!



The 8 Domains of Livability

The AARP Network of Age-Friendly States and Communities uses the 8 Domains of Livability framework to help towns, cities, counties, and states enhance livability for residents of all ages.

1. Outdoor Spaces and Buildings
2. Transportation
3. Housing
4. Social Participation
5. Respect and Social Inclusion
6. Work and Civic Engagement
7. Communication and Information
8. Community and Health services

Source: AARP



Tanya Rand



Bob Shoemake



Jenna Kress



Melanie Ferries



Karin Trail-Johnson

Internship Spotlight: Piloting an Aging Well Support Group

by Annie Collins

During my foundation placement at Bozeman Health Inpatient and Outpatient Palliative Care in Bozeman, MT, I co-facilitated and helped write the curriculum for a pilot aging well support group at a local independent living facility with my supervisor. The group met for eight weeks, with a new topic each week. The topics were chosen from a combination of brainstorming with the AEA scholars and requests from residents. They included transitions in aging, social connection and engagement, self-care, grief and loss, purpose and meaning-making, resilience, hope and spirituality, and ending well.

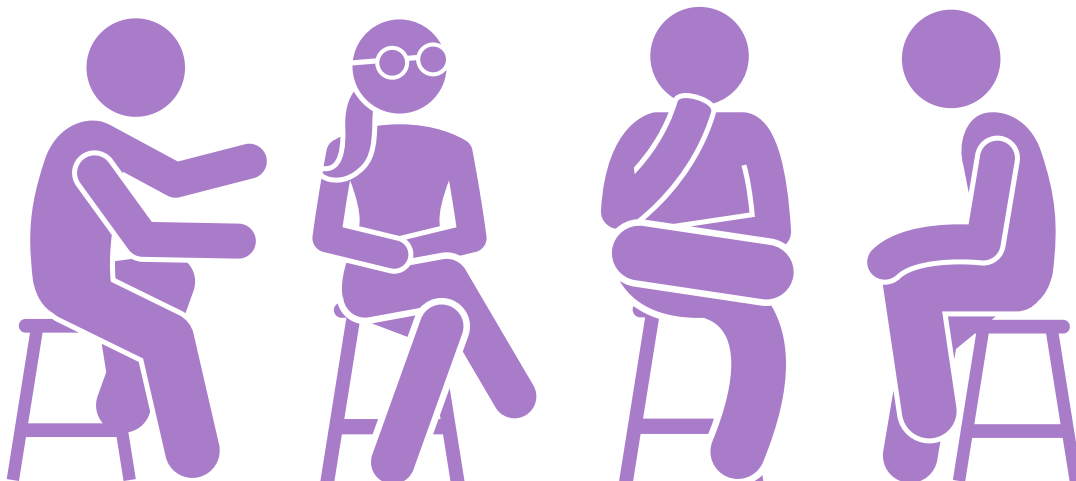


Annie Collins- AEA hybrid scholar from Montana!

Each week, we started with introductions and an icebreaker, followed by an overview of the topic.

During our discussions, group members shared stories of their experiences related to the topic, such as moving to the independent living facility, strategies for better sleep and exercise, coping with the loss of loved ones, finding meaning and purpose and building resilience, what brings them hope and comfort, and thoughts on end-of-life care. Many of these stories and lessons shared will stay with me always. For example, during our grief and loss session, a man shared that he sometimes feels his wife's presence in the room, even though she passed over a year ago. A woman shared that she has a positive outlook on aging and will try to stay active in mind and body for as long as she can because she experienced an injury when she was younger that debilitated her, making her grateful that she is still alive.

We asked group members to fill out a feedback survey at the end of the last session so that our agency could assess the group's success. The results showed that the group was well received, and residents expressed interest in participating in similar groups in the future. Due to the group's success, other groups focusing on aging-related topics may be held at other local facilities. My supervisor and I both agreed that this group was one of the highlights of our year. Getting to know the older adults, hearing their life stories, and helping them navigate current aging-related struggles was a very rewarding experience.



AEA Alumni Spotlight: Carol Ashwood, MSW, LICSW

by Leticia Ahianyo

Why did you decide to work with older adults?

I have worked with older adults since 1988, first as a music therapist and later as a social worker. I have continued to work with this population because I have a passion for it.

What role did your education play in this?

With both of my degrees, I chose to direct my assignments and field placements to focus on older adults. Fortunately, the AEA program started at UST in 2009 and this reinforced my desire to study and work in the field of aging.



Leticia and Carol at the AEA Workshop

What excites you about working with older adults?

There is so much variety in this work. I enjoy that I can work with individuals, caregivers, families, and groups. And, contrary to what people might think, there is a lot of diversity among older adults.

What challenges have you faced working with this population?

Family members often ask me to provide referrals for residential care settings and home care. I have a hard time giving informed referrals due to the ever-changing staffing issues in care communities. Families are having a difficult time finding good, consistent care. Also, it is a challenge to find providers/doctors with an interest and experience working with older adults, especially those who are living with dementia.



Photo of Carol Ashwood providing caregiver support from [Open Circle Adult Day Services](#) website

In what settings have you worked with older adults?

I have worked in the following settings (as a music therapist and a social worker): long-term care, assisted living, transitional care, memory care, hospice, independent living, and adult day services.

In what settings have you worked with older adults?

In my work with older adults and caregivers I have used the following: solution-focused, life-review, reminiscence therapy, skill building, and strengths-based interventions.

What advice do you have for incoming gerontological social workers?

Commit to and continue to work with this field. We need you!



Photo of Carol Ashwood at the AEA Workshop

Clinician Spotlight Interview: Anna Hamzehpour, MSW, LCSW

by Annie Collins

A former St. Kate's/St. Thomas MSW graduate, palliative care social worker Anna Hamzehpour was my foundation field supervisor this year in Bozeman, MT. As an AEA scholar, I truly hit the jackpot with Anna as I gleaned from her 10+ years of experience as a social worker, a significant part of her work focusing on older adults. It was my pleasure to interview Anna for this article.

What sparked your interest in social work?

My grandfather was going through cancer treatment when I was a child and although the whole medical team was extraordinary, I was in awe of the hope and support both my grandparents received from the social worker. I wanted to be someone's hope and support one day.

How did you decide to work with older adults?

My clinical internship was with hospice. I didn't know I wanted to work in hospice or with older adults prior to that internship but I loved the work and it felt like it came naturally to me.

What is your favorite thing about working with older adults?

I never stop learning. Every person has taught me so much about resilience, perspective and life.



Photo of Anna Hamzehpour



Photo of Bozeman Health where Anna Hamzehpour works in Bozeman, MT

Describe your current role as a palliative care social worker.

I work as a palliative care social worker and rotate between the inpatient hospital setting and outpatient home/clinic setting. In the hospital I work with the rest of the medical team to meet with patients and have discussions about their medical diagnoses and overall goals. Our team also provides end-of-life care in the hospital. In the outpatient home/clinic setting, I provide one on one counseling to older adults facing a life limiting illness.

What is your biggest piece of advice for clinical social workers who are new to the field?

Listen more than you speak. Have Confidence, trust your instincts, know you are valued! Okay, maybe that's more than one piece of advice :)



Conferences & Workshops

Minnesota Hospice and Palliative Care Conference

Meaning-Centered Psychotherapy Session

by Annie Collins

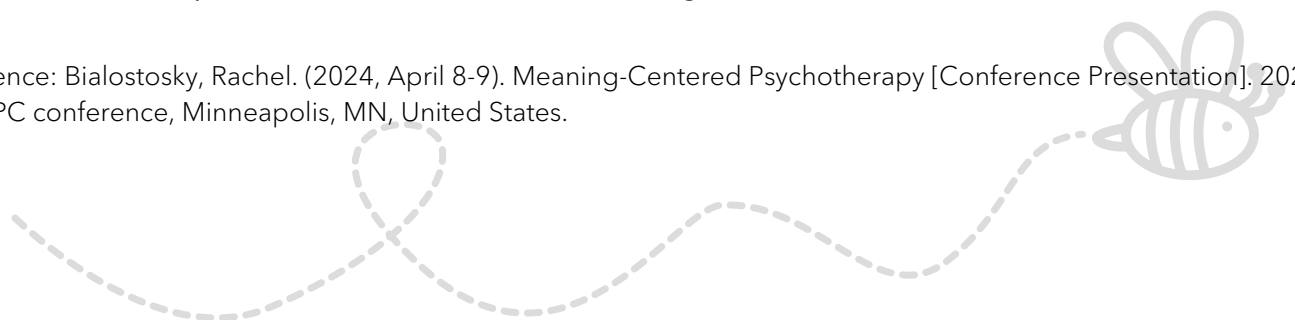
I attended the breakout session on Meaning-Centered Psychotherapy (MCP) at the 2024 MNHPC conference. According to the presenter, Rachel Bialostosky, MCP was “developed to address psychological distress and existential concerns of living with cancer” (Bialostosky, 2024). MCP consists of 7 sessions where patients work with the therapist to find meaning in their lives. Each session contains didactic, discussion, and experiential exercise sections where the therapist helps the patient explore personal issues and feelings, understand sources of meaning, and develop coping skills and agency. The purpose of MCP is to “help diminish despair, demoralization, hopelessness, and/or hope for hastened death” (Bialostosky, 2024).



During the sessions, the therapist will have the patient share the story of their illness, describe past meaningful moments, explore identity, address what has changed, and name meaningful accomplishments. The therapist will introduce the concept of a good death and encourage the patient to take care of unfinished business. They will discuss what gives the patient life, their understanding of meaning, and their hopes for the future. The essence of MCP is captured in the following questions: “Can you describe one or two experiences when life has felt particularly meaningful to you? Whether it sounds powerful or mundane. Just a time when you felt really alive or connected?” (Bialostosky, 2024).

MCP is a strengths-based therapy that aligns with social work values. It helps patients improve their quality of life by addressing existential distress and differs from treatment for a diagnosis of depression. MCP can be conducted in person or virtually, in group or individual sessions, and can be paused and resumed based on the patient’s needs. Studies have shown that MCP improves symptoms of anxiety, depressed mood, hopelessness, and spiritual well-being. This presentation impacted me as a palliative care intern and a future geriatric social worker.

Reference: Bialostosky, Rachel. (2024, April 8-9). Meaning-Centered Psychotherapy [Conference Presentation]. 2024 MNHPC conference, Minneapolis, MN, United States.



Your Best Ending: Having a Health Care Directive in Place

by Leticia Ahianyo

I attended a breakout session on healthcare directives at the [MNHPC](#) conference, a topic that is not commonly discussed in my native country, Ghana, West Africa. This subject intrigued me, as I had heard about healthcare directives during my internship, and I was eager to use this opportunity to deepen my understanding and knowledge.

The presenters emphasized that, although this is a vital document, many people put off completing it. As social workers, we are responsible for informing and educating our clients about the necessity of committing to this process. A patient's voice should be the loudest in the room, even when they cannot communicate. A healthcare directive, guided by the patient's wishes, is the best defense that a patient will get to receive the care they want and avoid care they do not want. We should support clients in viewing this as an opportunity to make their voices heard, have peace of mind, and provide clarity for their medical team.



AEA Scholars and Dr. Melissa Lundquist at MNHPC conference

When a client is choosing a health care agent, it should be someone who will support and believe in their decisions. Clients should provide clear guidance on how they want situations handled to ensure that a power of attorney does not make decisions contrary to their wishes in the event they cannot communicate. Clients should be urged to complete one before a crisis, and it is important to review it often.

Social workers can help spread the gospel of healthcare directives by initiating conversations, explaining the process, and assisting clients with completing the forms. Clients prefer simplicity, and our role is to help make it easy for them to understand and complete. Anyone aged 18 and above can establish a healthcare directive, which is available at no cost. Clients should be encouraged to put themselves in the driver's seat of their health. You can get copies of health care directives from [Honoring Choices](#).

Keynote Speaker: Tips From Dead People

by Jenna Kress

Attending the [MNHPC](#) conference was an amazing experience, highlighted by the keynote speech from Mary McGreevy, a social worker and TikTok influencer known as [@TipsFromDeadPeople](#). McGreevy shared insights on how obituaries can aid the grieving process, emphasizing that they should be detailed and honest. Such obituaries, she argued, allow us to interact with death in a healthier way and provide comfort as we revisit them over time.

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McGreevy's talk focused on the essence of a good obituary, which includes the person's background, the circumstances of their death, and reflections on their life. She stressed that, contrary to our high-achieving, driven society, it is often the small, everyday moments that leave the most lasting impressions on those we leave behind.

Humor, McGreevy suggested, can also play a crucial role in softening grief. Funny stories often bring a sigh of relief and can help lighten the emotional burden of loss. She spoke of the concept of the "brutal beautiful truth," advocating for honesty in obituaries, even when it hurts, as this authenticity resonates most with her TikTok followers who engaged the most with stories about flawed people.



MNHPC keynote speaker Mary McGreevy and creator of [@TipsFromDeadPeople](#)

Among the lessons McGreevy has gleaned from reading numerous obituaries is the importance of living in the moment and overcoming negative self-talk that holds us back. She encouraged attendees to clean their slates, reconnect with estranged friends, and seek redemption, reminding us that we are more than our worst failures.

In summary, McGreevy's message was clear: obituaries can help create a "good death" by ensuring our stories are told and cherished. Her words inspired listeners to live fully and authentically, making the most of every moment and every relationship so that when our time comes, our stories reflect lives well-lived and deeply loved.

Keynote Speaker: Steven Garner by Annie Collins

All of the keynote speakers at the conference were great, but I particularly enjoyed listening to Steven Garner. Steven was imprisoned as a young adult in Angola, Louisiana at a maximum-security prison. Over his life sentence, Steven saw the lack of dignity and worth given to inmates, particularly at the end of life. Together with the warden of his prison, Steven helped develop Angola End-of-Life Care, a model hospice program for correctional facilities. Through this program, volunteers helped inmates find resolution at the end of their lives, often by visiting with family members and having a proper burial, practices that are uncommon in most prisons. This philosophy that is at the heart of social work, that all people, regardless of who they are or what they have done, have dignity and worth, was solidified for me in my internship in palliative care this year.



MNHPC keynote speaker Steven Garner

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In addition to helping develop the hospice program, while in prison Steven learned quilting to help fund the program. He has become so good at his craft that his quilts are featured in books, articles, and museums. His quilts are also placed on the caskets of inmates who die in prison. I had the pleasure of talking with Steven and his niece during a break at the conference, and they are truly passionate about his craft. What struck me most about Steven and his story was that instead of becoming bitter and resentful at being imprisoned so young, he was humble, teachable, and compassionate towards his fellow inmates. He saw a need and worked hard to help meet that need, resulting in a truly ground-breaking hospice program with a far-reaching impact beyond what most people get to witness or be a part of.



Annie Collins & Jenna Kress meeting Steven Garner

Whole Person Health Summit

Keynote Speaker: Dr. Anthony Stately

by Jenna Kress

I recently had the privilege of attending the Morrison Family College of Health's (MFCOH) Whole Person Health Summit. This conference serves as a vital reminder that individuals are far more than their symptoms. They are complex beings with rich cultural, spiritual, and historical backgrounds, each with a life beyond their physical ailments.

The summit's first keynote speaker was Dr. Anthony Stately, the president of the Native American Community Clinic (NACC). Dr. Stately's talk focused on recentering indigenous practices and reimagining whole person wellness. At NACC, patients are referred to as "relatives" rather than clients, reflecting the clinic's commitment to a more personal and respectful relationship. Dr. Stately shared a poignant story about a man named Frank, who came to the clinic and participated in smudging. Frank tearfully remarked, "I have not had medicine in seven years." Although he had access to Western medicine, it wasn't "his" medicine, highlighting the profound importance of cultural traditions in healing.



Dr. Anthony Stately giving his keynote at the Whole Person Health Summit

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His story underscored the clinic's mission to incorporate traditional medicine, exemplified by their garden project, which grows herbs for community use.

Another powerful example shared was that during the COVID-19 pandemic, NACC invited tribal elders and healers to bless the vaccines, praying for the community's safety. This culturally significant act helped increase vaccine uptake among minority groups who often distrust the U.S. medical system due to historical injustices.



Photo from the medicine section of [NACC](#) website

The Whole Person Health Summit reinforced the idea that authentic community and solidarity are essential for holistic health and well-being. By fostering deep connections and embracing cultural traditions, we can build a healthcare system that truly supports and heals everyone. If you are interested in staying up to date with MCFOH's Health Equity events please sign up for their [listserv](#)!



Minnesota Gerontological Society Conference

Bridging to Comprehensive Dementia Care in Minnesota

by Jenna Kress

At the recent [MGS](#) conference, I attended the breakout session "Bridging to Comprehensive Dementia Care in Minnesota" led by Patrick Zook, MD. This session highlighted the innovative approach practiced by the [Central MN Dementia Community Action Network \(D-CAN\)](#) through their Dementia Resource Center Clinic in St. Cloud, MN. For over two years, D-CAN has been implementing a new medical model of Comprehensive Dementia Care, offering integrated, multi-service dementia evaluations that result in detailed care plans aimed at reducing symptoms and addressing modifiable risk factors.



Dr. Zook emphasized the significant delays in accessing dementia care, noting that it can take 5-6 months to see a neurologist, by which time intervention opportunities may be limited. He underscored the importance of treating people with dementia within the context of their family systems, highlighting that supporting caregivers is crucial for their own well-being and leads to better care for the dementia patient.

The D-CAN care model includes comprehensive evaluations that lead to individualized care plans, caregiver support, and integrated services such as dementia-informed counseling, cognitive performance testing, support groups, and guided autobiography classes.

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Additionally, it involves assessing and addressing dementia risk factors, including adverse childhood experiences, which Dr. Zook noted appear in half of their patients. Ongoing care plans ensure continuous monitoring and reassessment to adapt to the changing needs of patients and their families, while medical support includes physical exams, clinical assessments, medication management, and treatment of related conditions.

I left the session with a reinforced understanding of the importance of comprehensive dementia care and the dementia care and the need to consider family systems in supporting dementia patients. I hope to explore these crucial aspects of care further during my foundation internship at [Open Circle Adult Day Services](#).



Jenna Kress and Krystal Bickel at the MGS Conference



Minnesota Coalition for Death Education and Support

The Grieving Brain

by Jenna Kress

At the Fall 2023 Minnesota Coalition for Death Education and Support (MCDES) conference, titled "The Grieving Brain: The Surprising Science of How We Learn from Love and Loss," I had the opportunity to learn from [Mary-Frances O'Connor, PhD](#). Dr. O'Connor is an associate professor of psychology at the University of Arizona, where she directs the [Grief, Loss, and Social Stress \(GLASS\) Lab](#).

During the session, Dr. O'Connor shared insights from her research, revealing the profound impact of grief on our brains and bodies. She began by discussing the responses observed when bonded pairs, such as parents and infants, are separated. Initially, separation triggers a sense of protest, characterized by behaviors like crying or searching for the missing person, accompanied by physiological changes such as increased heart rate and cortisol levels. Over time, this protest can evolve into despair, marked by withdrawal and deep sadness.

Dr. O'Connor emphasized that relationship bonds are as essential to us as food and water, vital for our survival and well-being. Protest behaviors are crucial for reuniting with loved ones who are temporarily absent. However, when someone dies, this response does not bring them back and leads to a reduction in the body's production of neurochemicals, which may explain why the experience of loss is often described as painful.



Mary-Frances O'Connor

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Dr. O'Connor's research also highlighted the concept of "Gone- But-Also-Everlasting Theory," which suggests that our brains create a mental map of our loved ones' presence in time and space. When a loved one dies, this map is disrupted, and we struggle to reconcile the physical absence with our enduring emotional bond.

The session left me with a strong desire to learn more about the diverse forms of loss, including those not traditionally associated with grief, such as the loss of a pet, a breakup, or the decline in health due to chronic illness. Dr. O'Connor's exploration of grief as a form of learning and adaptation provided profound insights into how our brains and bodies respond to love and loss, offering valuable perspectives for supporting individuals through their grieving processes.

MFCOH's Interprofessional Education Workshop

IPE Workshop Summary

by Tanya Rand

In February, AEA social work scholars were able to participate in the Morrison Family College of Health's (MFCOH) Interprofessional Education Workshop with other social work, psychology, nursing, public health, and exercise science students. Supporting the mission of the MFCOH to "prepare highly skilled and caring professionals who are culturally responsive, practice with ingenuity, and proactively advance health equity and social justice", the MFCOH 2024 IPE event was an opportunity for scholars to learn how to provide team-based whole person care. The training included both didactic and interactive aspects including an in-depth interactive case study involving the care of an older adult from the Somali community.



MFCOH Students



Allina HealthCare Panelists at IPE event

This event was held in partnership with Allina HealthCare and co-sponsored by the generous support of the George Family Foundation. We were grateful for the opportunity to hear from providers at Allina HealthCare who all brought their experiences providing whole person equitable health care (sharing strengths, challenges, and best practices for patient centered care). A special thank you to Allina HealthCare workshop partner liaisons, Cindy St. George- Allina Heath System (Social Work), Kayla Appleby- Abbott Northwestern Hospital (Social Work), and Mallory Bushey- United Hospital (Social Work) who helped organize this event!

National Center to Reframe Aging

Reframe Aging Fundamentals Workshop

by Jenna Kress

I and another AEA scholar Krystal Bickel, recently attended the National Center to Reframe Aging Fundamentals workshop, which aims to redefine the way we talk about aging. The goal of the Reframe Aging movement is to change the language surrounding aging to help us view it more positively and equitably. Framing involves making strategic choices about what to emphasize, how to explain issues, and what to leave unsaid. Effective framing can lead to shared communication, which in turn drives systemic and policy changes.

We explored how public perceptions of aging often fall into traps like individualism, crisis language, and stereotypes. These perceptions often ignored the communal aspects of aging and perpetuated stereotypes. Additionally, highlighting that problems can be solved fosters a positive outlook and encourages large-scale change.

Building momentum was another crucial strategy discussed. For instance, instead of saying that many older people are frail and vulnerable, we can reframe the narrative by emphasizing the need to strengthen community bonds to support everyone, including older adults. By including solutions in discussions about big problems it shows that change is possible and highlights the collective benefits of systemic solutions. Effective frames can shift thinking in multiple ways, increasing knowledge, improving attitudes, and growing policy support.

This training left me inspired to use strategic framing to challenge ageism and promote a more inclusive perspective on aging. I look forward to applying these insights to my research and during my internships!

Be sure to check out The National Center to Reframe Aging's resources found on their webpage.



AEA scholars Jenna Kress and Krystal Bickel at Reframe Aging Workshop



CAMPUS ENGAGEMENT

Whole Person Equity Initiatives

Each year, the Morrison Family College of Health hosts multiple events focused on whole-person, culturally responsive care to advance health equity. Please sign up for our listserv so you can learn about future events or get updates about our efforts. You can also contact Melanie Ferris at melanie.ferris@stthomas.edu for more information.



Whole Person Health Summit

Selim Center for Life Long Learning

The Selim Center for Lifelong Learning at the University of St. Thomas provides high-quality educational opportunities that help adult learners grow in mind, body, and spirit. The center's programs include non-credit lecture series on topics from across the liberal arts; Go-to-College, which allows student over 40 to audit undergraduate classes on a space available basis; and domestic and international Study Travel (think "study abroad for adult learners.") Pricing for the center's program offerings is on a sliding scale. Contact selimcenter@stthomas.edu to sign up for our monthly e-newsletter.



Lifelong learners at a Selim Center course

Next Chapter

Do you know someone who is retiring soon or has recently retired? This milestone is often reached with mixed feelings and questions. How will I spend my time? What is important to me? Who will I spend time with?

The Next Chapter Program is a 6-month guided cohort program for new retirees to explore what they want to do and who they want to be in retirement. The group meets one Saturday a month, completes readings and "homework" between sessions and learns from facilitators and each other. Participants leave the program with a personal next chapter plan for their retirement and report that they feel less anxious and more excited about this new phase of life.

Consider joining us for the fall cohort which begins in September! The application (found [here](#)) priority date is mid-June and spots will be filled as available after mid-June. Contact ustnextchapter@stthomas.edu for more information.



Next Chapter retirees at monthly session