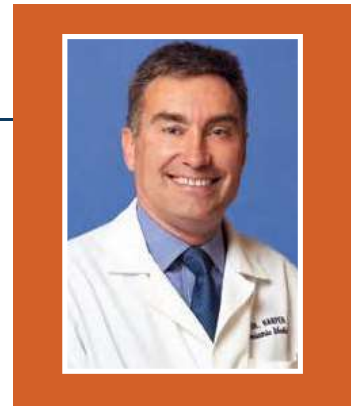


# FROM OUR PRESIDENT

## MICHAEL HARPER, MD, AGSF



I am writing this after attending our first in-person Board meeting since November of 2019. It felt good to be back together with colleagues in the new AGS office space on Fulton Street. Our new space is smaller, reflecting that the AGS has gone hybrid. Going hybrid allows us to continue offering a flexible approach to work for our wonderful AGS staff. This is in addition to reducing our overall operational costs, which alleviates pressure on our budget. As always, I was amazed by our staff’s ability to seemingly effortlessly add moving the office to what is already a very full plate of programs, projects, and products.

At the Board meeting, staff and the Board finally had time to reflect together on the data that we and other societies have been gathering on the future of face-to-face meetings. One of the things that I think we all learned during COVID-19 is that virtual meetings can be very effective and in a lot of ways they are less of a drain on us as individuals than the days when we traveled – particularly when traveling across time zones as I often do. From our 2021 virtual meeting, we learned that many attendees appreciated that they could attend more sessions and from our 2022 hybrid meeting we saw that a number of our members chose the virtual offering. We also have been hearing from our own members and from other societies that there is pressure on academic travel budgets and that early career health professionals and those in training appreciated the flexibility that a virtual meeting offers. We realized that AGS is in a unique position to pilot an alternating schedule of virtual and hybrid (face-to-face with an on-demand option) annual meetings from 2023 to 2026, given that we do not have hotel contracts for 2024 and 2026 (see Table 1). We believe that

this pilot will offer us an opportunity to collect more data on member preferences and also to potentially serve a broader audience during the years that we are fully virtual. And when we do gather in-person after meeting virtually, we now have a greater appreciation for just how special that time



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can be. One more important benefit is that going virtual every other year is one way that AGS can reduce its carbon footprint, given the impact on the environment of a four-day face-to-face meeting. You’ll be hearing more over the coming year about how we plan to support more frequent virtual networking among our members as we undertake this pilot. Stay tuned.

The end of the year is always a time when my family takes stock of our charitable contributions and the end of 2022 is no different. We support a number of great organizations through our giving but our own AGS Health in Aging Foundation is always top of my list as we plan for our end of year donations and look ahead to the New Year. There are three reasons for that.

**First, the Health in Aging Foundation supports potential future leaders in geriatrics through its programs.** I know that my donation brings trainees to our AGS Annual Meeting, supports New Investigators who are at the cutting edge of geriatrics research, and honors trailblazing leaders through our named awards (Hurria, Silverstein, and Yoshikawa). In addition to health professions students and residents, I am particularly pleased that, since 2016, our foundation has been bringing incoming geriatrics fellows to the AGS Annual Meeting – an opportunity they might not otherwise have as they finish their residencies and transition into new roles. In 2022, as incoming President,

**Table 1. 2023 – 2026 AGS Annual Meeting Dates**

Year	Location	Dates
2023	Long Beach, CA	May 4-6 (Preconference Day, May 3)
2024	Virtual	May 9-11 (Preconference Day, May 8)
2025	Chicago, IL	May 8-10 (Preconference Day, May 7)
2026	Virtual	May 7-9 (Preconference Day, May 6)