ABSTRACT

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A STUDY OF FACTORS THAT INFLUENCE INTEREST IN GERIATRIC SOCIAL WORK AMONG MASTER OF SOCIAL WORK STUDENTS IN METROPOLITAN ATLANTA

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The purpose of this study was to determine if aging attitudes, informal knowledge and formal education impact Master of Social Work (MSW) student interest in geriatric social work. A total of 70 MSW students participated in this study. The students were recruited from several metropolitan Atlanta MSW programs. A quantitative research design was employed, and surveys were used to gather the data. This study was designed to document the characteristics of MSW students and to predict interest based on perceptions using Ordinal Regression analysis. There was statistical significance identified with the aging attitudes and formal education variables and no statistical significance identified with the informal knowledge variable. The conclusions from this study suggest continued research regarding the factors influencing interest in geriatric social work.
A STUDY OF FACTORS THAT INFLUENCE INTEREST IN GERIATRIC SOCIAL WORK AMONG MASTER OF SOCIAL WORK STUDENTS IN METROPOLITAN ATLANTA

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Whitney M. Young Jr said that “It is better to be prepared for an opportunity and not have one than to have an opportunity and not be prepared” (Wilkerson, 2011, p.167). Pursuing the Ph.D. has been a challenging journey but rewarding and necessary as I prepare for future opportunity to create change in this world. I want to thank everyone who provided support and encouragement along the way especially, my parents, Phyllis and Steven Chenault. They gave me peace of mind and the ability to devote my life to this journey by providing unconditional love and being a second set of parents to my children. I thank my loving husband, Ryshaard Davis Sr. for being my partner, inspiration, for wiping my tears and cheering me on to keep going. My beautiful children Imani, Isaiah, Rickey, and Laila, are the reason why I strive. I want them to see that anything is possible and if you dream it, you can achieve it. I am grateful to my grandmother Margaret Jenkins, who is no longer on this earth but with us in spirit. She started this work in gerontology and passed it on to my mother who passed it on to me. I appreciate Dr. Tiffany Washington, Doctoral Candidate Naynette Kennett, Dr. Corinne Warrener and Dr. Kate Morrissey-Stahl for helping me with the distribution of surveys. A special thank-you goes to Dr. Jennifer Talley who offered encouragement and pushed me to reach my deadlines and goals when I doubted myself. Lastly, I would like to thank my committee members, chair Dr. Darrin Wright, Dr. Margaret Counts-Spriggs, Dr. Daniel Teodorescu and Dr. Sean Warner for continued direction, advisement, and support.
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CHAPTER I
INTRODUCTION

The field of geriatric social work focuses on the biopsychosocial development process of aging. People are living longer than ever, and the population will see an explosion of those who are 65 and older causing a profound impact on society. Humans encounter biological, psychological, cognitive and social changes producing positive or maladaptive outcomes as they age. As society anticipates the increase in aging, the development of highly competent social gerontologists who are prepared to meet the biopsychosocial needs of older adults should be a global priority. However, Kolb (2008) purported that despite expected increases in the number of older adults, only a small percentage of graduating social work students in the United States choose geriatric social work as their specialty.

According to Mather (2018), by 2060, the amount Americans ages 65 and older are estimated to more than double from today's number of 46 million to over 98 million, and the total population of those age 65-and-older will increase to nearly 24 percent from today's 15 percent. As the United States ages over the next several decades, its older population will become more racially and ethnically diverse. As this diverse population increases, so will the aging-related social and economic challenges.
The U.S. Census Bureau reported that in the 1950's the total number of African Americans and other black minorities in the United States totaled 10 percent of the population at 15,042,286 (Brown et al., 2013). The U.S. Census Bureau also indicated that the African American adult population age 65 and older is projected to 18.5% in 2050 while they represented 9.8% in 2008 (U.S. Census Bureau, n.d.)

As a Licensed Master Social Worker (LMSW) working with aging veterans in a Department of Veterans Affairs nursing home, this researcher has discovered how critical social workers are to promoting quality of life for this population. However, this researcher did not receive prior specialized geriatric social work training before employment. Skills were acquired by applying standard social work interventions and adjusting practices based on the outcome. This researcher feared working with the aging due to biases, lack of knowledge and having minimal personal and formal educational exposure to the population. However, through this nursing home employment experience, this researcher was able to dispel fear and found joy and passion for serving aging veterans.

Social workers assisting with the unique needs of the aging population requires specialized knowledge to include assessment, helping clients with fulfilling goals and navigating through various policies governing available services, resources and daily way of life. To serve the aging population competently, schools of social work and students must understand how perceptions, knowledge of aging and external factors which impact service delivery. Social workers must be interested in developing geriatric skills and expertise through the inclusion of structured geriatric curriculum and experiential
learning experiences. However, there are challenges with attracting Master of Social Work (MSW) students to the field of geriatric social work. Estimates indicate that less than 3% of MSW students are enrolled in an aging concentration, as compared to 19.0% enrolled in children/youth concentrations (Curl, Simons, & Larkin, 2005). More recent research has suggested that only 3% of MSW students typically select an aging or geriatric social work concentration (Dakin, Quijano, Bishop, & Sheafor, 2015).Lee et al. (2006) purported that the challenges for the field of geriatric social work include the insufficient number of social workers with training in gerontology, negative beliefs about working with adults age 65 and older, inadequate social work aging education programs, minimum social work faculty knowledgeable about aging, and lack of interesting social work positions in gerontology. This study will explore the factors which impact MSW student’s interest in the field of geriatric social work.

**Statement of the Problem**

Demographic and labor force trends indicate a critical need for competent professionals trained to work with older adults (Bergman & Erickson, 2014). The projected growth of adults age 65 and older in the United States will generate policy and program challenges impacting Social Security, Medicare, and Medicaid for example. This increase will also affect families, businesses, and healthcare systems altering entire structures and status quo (Ortman, Velkoff, & Hogan, 2014). Therefore, proficient geriatric social workers are crucial to meet the demands of such systems.

Social workers who serve the aging population produce better service outcomes when proficient in evidenced-based aging-related practices. Within the context of the
clients’ expectations and values, use of evidence-based practices (EBP) integrates social work expertise with the best available evidence, resulting in a marked improvement of three critical areas of social work professional practice: the services offered by social workers, the care of clients, and the targeted outcomes (Castillo et al., 2016). Aging specific assessment, case management, crises intervention, and therapeutic interventions equip the professional with tools to enhance the quality of life.

The way social workers serve clients is a direct reflection via internal and environmental influences such as experiences with the population, attitudes, perceptions, educational background and other factors. According to Dasbas and Kesen (2015), attitudes of social work students towards ageism is critical both for the MSW’s career advancement and the impact of the quality of services provided to the elderly. Education and personal exposure to the aging population could assist with dispelling negative attitudes and generating professional interest in the field.

Increasing interest among social work students to pursue a career in geriatric social work is vital towards preparing a qualified pool of clinicians capable of meeting the current challenges and future demands of adults age 65 and older. According to Kolb (2008), the number of professionally educated social workers employed in geriatric social work and the number of graduate level social work students planning to work in this field is inadequate to meet the need of the geriatric population. It would be irresponsible for the field of social work to not address the lack of interested geriatric social workers when the evidence suggests the strain on social and economic systems is inevitable. According to Bergman and Erickson (2014) labor force shortages already exist or are predicted in
several professions critical to meeting the needs of our aging population including social workers.

Bergman and Erickson (2014) purported that geriatric social work in the U.S. had initially been an “afterthought” as students had not generally been interested in such populations nor such specializations or concentrations. Bergman and Erickson further indicated that younger generations are making educational and career choices at a time when societal attitudes about aging are varied, but mainly are driven by fear, denial, and avoidance of personal mortality. If schools of social work are to enhance the number of students choosing aging courses and aging-related careers, they need to understand the factors related to these choices.

Schools of social work could benefit from understanding factors related to student interest in geriatric social work. By examining the factors that influence student interest, schools of social work can gather data to assist with enhancing their MSW programs by including evidenced-based geriatric content into their curriculum and experiential learning opportunities. Schools of social work also possess the platform necessary to expose students to geriatric opportunities available in society. The aging of the world has led to opportunities for geriatric social workers which can be facilitated by social work educators and administrators (Martin, Kosberg, Sun, & Durkin, 2012).

Social work education can encourage the preparation of those wishing to focus on the needs of older populations (Martin, Kosberg, Sun, & Durkin, 2012). Infusion of gerontology into MSW curriculum and practicum experiences may increase the pool of proficient practitioners in the field. Aging-related curriculum and contact with older
adults were related to more significant interest in learning about older adults and choosing geriatric related careers, as were lower levels of anxiety and ageism. Experiential learning is associated with a more significant interest in aging-related careers (Bergman & Erickson, 2014). Social workers in aging-related occupations provide services to assist with navigating through challenges that impede on the quality of life and identifying the strengths. Through social work education, geriatric social work students gain valuable knowledge and skills to assist the aging population with aging well in society. Therefore, to address the problem of the lack of trained geriatric professionals interested in the field, evidence-based geriatric social work education is crucial to shaping student knowledge through the curriculum and experiential learning and thus producing competent geriatric social workers.

**Purpose of the Study**

To contribute to the limited research on MSW’s interest in working with adults age 65 and older, the purpose of this study is to explore the factors influencing MSW student’s interest in geriatric social work. This study will examine whether the variables: (1) aging attitudes and implicit biases, (2) informal knowledge and (3) MSW education exposure impacts student interest to become geriatric social workers. The participants of this study are MSW students actively enrolled in: Three (3) master-level social work programs in metropolitan Atlanta;1 Historically Black College and University (HBCU) and 2 Predominantly White Institutions (PWI). The participants are also MSW graduates in the Atlanta metropolitan area.
Research Questions

The research questions of this study address the factors related to MSW student interest in geriatric social work.

RQ1: Does the interest in working with older adults vary significantly based on MSW student aging attitudes/implicit biases?

RQ2: Does the interest in working with older adults vary significantly based on MSW student informal knowledge about the geriatric population?

RQ3: Does the interest in working with older adults vary significantly based on MSW student exposure to formal geriatric social work education?

By answering these questions, this study attempts to test the following hypotheses:

Hypotheses

The null hypotheses of the study are as follows:

Ho1: There is no statistically significant relationship between aging attitudes/implicit biases and MSW student interest in working with older adults.

Ho2: There is no statistically significant relationship between informal knowledge about the geriatric population and MSW student interest in working with older adults.

Ho3: There is no statistically significant relationship between formal geriatric social work education exposure and MSW student interest in working with older adults.
Significance of the Study

Today, the older population is rapidly increasing; hence the community who would mostly need social services in the future would be the elderly (Dasbas & Kesen, 2015). However, there is a shortage of geriatric social workers to meet the biopsychosocial needs of aging individuals. Therefore, determining the factors which impact interest in geriatric social work is critical. The formation of a highly skilled pool of geriatric social workers begins with acknowledging the gap. Data collection regarding the factors that impact geriatric social work interest in working with older adults can assist with strategic planning to address the problem.

This study seeks to explore MSW student perceptions regarding whether the factors: aging attitudes and implicit biases, informal knowledge, and formal MSW education impacts student interest to become geriatric social workers. According to Bergman and Erickson (2014), the demographic and labor force trends suggested a critical need for professionals who are specialized to work with older adults. This study is important because the data collected could assist MSW programs with developing evidenced-based geriatric curriculum and experiential learning opportunities while exposing students to the opportunities available in this field. Through these learning experiences, MSW social work students can be proficiently trained to meet the needs of one of the most vulnerable and growing populations.
Definition of Terms

This study focuses on geriatric social work interest among MSW students. The following definitions describe vocabulary consistent throughout the study.

1. Ageism- casual or systemic prejudice and discrimination based on age.
2. Aging- the biological, psychological and social process of growing old.
3. Baby Boomers- individuals born between 1945 and the late 1960s during an era when the U.S. population and economy grew expeditiously.
4. Biopsychosocial- biological, psychological and social factors which impact an individual’s overall well-being and quality of life.
5. Dependent Variable- interest of MSW students in geriatric social work.
6. Evidence-Based Practices- the use of researched interventions with clinical practice and integrity to guide the delivery of services.
7. Experiential Learning Theory- a theory coined by David Kolb describing the process of developing values, knowledge, and skills by doing. People learn by building connections between current knowledge and new concepts via practical experiences.
8. Formal Geriatric MSW Education – gerontology focused courses and experiential learning opportunities which provide students with aging and social work concepts that are useful in one’s work with geriatric clients.
9. Geriatric Social Workers- expert clinicians who are proficiently trained to meet the social service needs of the aging population with the overall goal of client quality of life.
10. Gerontology- the scientific study of the process of aging in older adults.

11. Schools of Social Work- formal higher education programs focused on teaching all aspects of the social work profession to students.

12. Aging Attitudes - aging attitudes refers to the implicit bias or stereotypes about the aging population that affect our understanding, actions, and decisions in an unconscious manner.

13. Independent Variables- aging attitudes, informal knowledge, and informal MSW education exposure.

14. Interest - a feeling of wanting to learn more about or to be involved in geriatric social work.

15. Informal Knowledge- is information acquired through personal experience other than formal education, i.e., caregiving for a loved one age 65 and older, self-directed reading and employment experiences.

16. Master of Social Work (MSW) Students- scholars pursuing a master’s degree in social work.

17. Transformational Leadership- a form of leadership using role modeling to transform followers into leaders by inspiring change, increasing motivation, sparking moral and optimizing performance by understanding strengths and weaknesses.
Overview of Subsequent Chapters

This study examines why only a small percentage of graduating social work students in the United States are choosing geriatric social work as their specialty, despite expected increases in the number of older adults. Students in social work programs require specialized education and experiences which can be provided by their MSW education programs. Understanding the factors impacting interest in geriatric social work is vital for the social and economic stability of the United States. The next chapter will highlight scholarly literature relevant to this study to include: a historical review of geriatric social work, aging demographics and statistics, and aging policies and programs.

This chapter will also review scholarly literature relevant to the variables in this study to include: aging attitudes and implicit biases, aging population challenges which may be a part of student’s and graduate’s informal knowledge, geriatric social work interest and geriatric social work education. Lastly, the next chapter will describe the theoretical frameworks used to explain the relationship between the variables in this study. Subsequent chapters of this study will consist of the methodology, presentation of the findings and summary and conclusion.
CHAPTER II
REVIEW OF THE LITERATURE

The goal of this chapter is to present a review of the scholarly literature concerning: aging, geriatric social work, and elements of formal MSW education to establish a need for exploring MSW student interest in geriatric social work. This chapter covers a historical review of geriatric social work, aging demographics and statistics, and aging policies and programs. This chapter will also review scholarly literature relevant to the variables in this study to include: aging attitudes and implicit biases, informal knowledge, geriatric social work interest, and geriatric social work education. Lastly, this chapter will describe the theoretical frameworks used to explain the relationship between the variables in this study.

A review of the literature outlining a historical overview of geriatric social work and demographic trends illustrates essential information relevant to the knowledge base of a specialized geriatric social worker. Grasping the population growth of those 65 and older both nationally and globally provides a contextual scope of the potential issues that come with such growth. With the rapid growth of the aging population comes challenges in which geriatric social workers must be prepared to address and support. Comprehending the different disparities within ethnic diversity, public health concerns,
and policies provide the professional with knowledge crucial to culturally diverse service delivery.

**Historical Perspective of Geriatric Social Work**

Throughout history, aging is a construct that has been conceptualized and reconceptualized throughout time. Consistently, the aged has been viewed as weak, insane and viewed as not having any purpose in society. Mann (2013) pointed out that the impression of older American’s during the depression was that they were impoverished, abandoned, unemployed, and sick. The corresponding developments of industrialization, urbanization, and mass unemployment collided with the financial collapse in the 1930s, leaving many of the aged without jobs or support from their extended families. These events severely caused trauma to the rising population of older Americans.

Moreover, Mann (2013) pointed out that advances in public health were instrumental in transforming life expectancy. From 1860 to 1930 the number of Americans over sixty-five more than doubled due to public health developments. Mann (2013) has further purported that from 1930 to 1940, the entire population increased by 7.2 percent; however, the older population grew by an additional 36.5 percent. In the past, American society attributed the challenges experienced by older adults to be a demographic or financial concern and not widely recognized by society. However, as time progressed, issues concerning older adults began to be recognized by the popular press, social science papers, welfare conferences and social work meetings (Mann, 2013).
According to Mann (2013), in the second half of the twentieth century, the United States chose to address old age by using wartime resources and determined that a biomedical approach was necessary because old age challenges were purely related to physical pathology. Mann reported that this approach caused health care cost to rise to an unsustainable amount and failed to address the multifaceted emotional, social and economic challenges of old age. As time progressed, the needs of aging adults were siloed into separate disciplines. Mann highlighted that some aspects of aging were discovered in laboratories, the illnesses of old age treated in hospitals, and the social problems of the elderly studied in universities. This separation of disciplines, which came with vast inequities in financial resources, reduced the possibility of a multipronged approach geared to enhancing the well-being and status of the elderly (Mann, 2013).

Mann (2013) stated that as a result of the separation of disciplines, geriatric social work was formed to meet the biological, psychological, social and spiritual needs of older adults. Research efforts that focus on the needs of older people are essential to developing evidenced-based social work interventions. Brown et al. (2013) stated that historically, valid methodological research instruments and data regarding the psychosocial patterns of aging African Americans were limited. Brown et al. (2013) purported that there is a need to increase geriatric researchers who study older adults from diverse racial and ethnic populations, specifically from the African American population.

Brown et al. (2013) stressed the importance of recognizing historical African American figures and accomplishments in the field of geriatrics as a basis for developing
highly competent diverse social workers and researchers. Brown et al. (2013) mentioned the contribution of an important geriatric social advocate named Eliza Simmons Bryant. She was the founder of the Cleveland Home for Aged Colored People formed in 1895. Eliza Simmons Bryant is known as a pioneer of African American nursing homes. She observed the unique needs of elderly African Americans who were left to care for themselves due to slavery and therefore she provided them with a place to live (Eliza Bryant, 2018). There is a need for more minority social workers ready to meet the needs of the growing diverse aging population.

The critical workforce need for geriatric social workers is heavily documented in the 2008 Institute of Medicine report, (Retooling for an Aging America: Building the Health Care Workforce, 2008). Social work is one of the critical professions providing an interdisciplinary approach to services for older adults and their families. The goal of the IOM report is to prepare all health care professionals and caregivers for work with aging adults and to intensify recruitment and retention of geriatric specialists (Damron-Rodriguez, Goodman, Ranney, Min, & Takahashi, 2013).

Ferguson (2012) agreed that the projections for a shortage of geriatric professionals are well documented throughout literature. Ferguson's research stated that in 1987, the National Institute of Aging predicted that by the year 2020 more than 60,000 trained social workers would be needed to care for the older population. Ferguson's research also reported more recent figures from a 2008-2009 National Bureau of Labor Statistics publication. These figures predict at least a 24% increase in the demand for health and public health social workers between 2008 and 2016. Ferguson concluded that
as the baby boom cohort continues to age, the need for geriatric social workers will grow even larger. Ferguson contended that this growth is not only due to the increase in the older population but to the retirement of seasoned social workers.

The number of new geriatric social workers and the number of social workers who as of 2012 specialized in serving older adults illustrate the potential for a social worker shortage according to Ferguson (2012). Ferguson’s research purported that in 1996, 34,480 students graduated with a master’s degree in social work from United States colleges and universities. Of these, only 1,071 planned to specialize in aging. Aging ranked fifth behind mental health, child welfare, health, and family services. In 2012, the number of working social workers who specialize in geriatric social work was roughly 9% of social workers while another 13% work in healthcare settings. Social workers in healthcare settings often assist the older population and their families (Ferguson, 2012).

The Council of Social Work Education (CSWE) Statistics on Social Work Education in the United States Report (2017) mentioned that full-time students from historically minority groups such as African Americans made up 39.7% of MSW enrollments. According to CSWE, African Americans with an MSW degree who were actively employed as a social worker made up 19.1% of the workforce (CSWE, 2017). Health Care Global (2014) purported that those of color among the aging population will grow from 17% to 33% by 2050. However, the diversity gap among social workers is anticipated to grow significantly. Health Care Global professed the need for geriatric social workers of all races is excellent, however increasing the pool of African American geriatric social workers is urgent.
For almost three decades, the social work profession in the United States has faced a significant challenge in its attempt to diversify the body of social workers with graduate level (MSW) education (Bowie, Cherry, & Wooding, 2005). Bowie et al. (2005) purported that historically the proportion of African American students enrolling in MSW programs is considerably lower to those of other races. Bowie et al. (2005) administered their survey at predominantly white institutions and purported that interest in social work among African Americans could increase if schools of social work aggressively recruited African Americans. Their research shows that the decreased numbers of African American student enrollment in MSW programs are due to the reduced availability of financial aid and the presence of institutional racism on campus. Bowie et al. (2005) mentioned that low MSW enrollment levels among African Americans negatively impact client interaction and service delivery with diverse populations due to the lack of diversity of social workers.

Literature by Dakin et al. (2015) reported that the social work profession has always been fundamentally general because social workers have emphasized person-environment interactions and intervention across system levels. Throughout the profession's history, the movement toward specialization is evident. There have been trends toward social workers working in clinical practice during economically stable periods within the United States (Dakin, Quijano, Bishop, & Sheafor, 2015).

Social workers can make unique professional contributions to the field of gerontology and older persons. However, studies show that social work is not adequately prepared to practice in an increasingly diverse aging society. Brown and Selassie (2017)
mentioned that the social work profession has expressed commitments to affirming how
diversity and culture shape the human experience. They also mentioned how the social
work profession is committed to developing social workers who can competently engage
in research-informed practice and practice informed research. Brown and Selassie's
research concluded that there remains a need in social work education for more
widespread use of culturally relevant pedagogies that can help develop competent social
workers.

**Aging Demographics and Statistics**

(U.S. Census Bureau, 2016) reported that 8.0 percent or (562 million) of the
global population were aged 65 and over when the global population reached 7 billion in
2012. In 2015, a few years later, the aging population grew by 55 million, and the
proportion of the older population increased to 8.5 percent of the total population. More
interestingly, in the next ten years, the post World War II baby boom generation in the
United States and Europe in conjunction with the older populations in Asia and Latin
America will witness an increase of about 236 million people aged 65 and older
worldwide. Consequently, from 2025 to 2050, the older population is anticipated to
double to 1.6 billion globally, while the entire population will increase by just 34 percent
over the same period (U.S. Census Bureau, 2016).

Many population forecasts illustrate changes within the United States that mirror
the global population growth. The United States population is quickly aging due to
increases in longevity and decreases in birth rate, leading to a “Silver Tsunami”
(Henderson, Maniam, & Leavell, 2017). The number of Americans ages 65 and older is
projected to more than double from 46 million in 2012 to over 98 million by 2060, and the 65-and-older age group’s share of the total population will rise to nearly 24 percent from 15 percent (Population Reference Bureau, 2019).

Felix and Watkins (2013) added an alternative view of analyzing the population growth of aging adults in the United States. They purported that by 2030, most of the states will see a population increase of those 65 and older by more than 5 percent. States that will an increase of more than 10 percent will be Maine and North Carolina. In 2030, states such as Florida, Maine, Pennsylvania, West Virginia, and North Carolina will continue to have the largest 65 and older population, just as they do currently. Predictions indicate that by 2030, one in four inhabitants of these states may be retired.

California’s aging population is growing at a faster rate than any other states in America. California is the most populous state in the U.S. and proportionally has the largest population of older adults at more than 3.9 million people over age 65. Older adults over the age of 65 are predicted to double by 2020, increasing the population to 6.5 million and 12.5 million in 2040. The increase will rise to 232% since 1990 (Damron-Rodriguez, Goodman, Ranney, Min, & Takahashi, 2013). While the population increases in California, so will the ethnic diversity within the state.

Damron-Rodriguez et al. (2013) research suggested that the most ethnically diverse elders in the United States reside in California. In 2010, the older non-Latino Caucasian population consisted of 61% of the state’s population. They purported that the non-Latino Caucasian population will decrease by 2050 to 36% and the dominant ethnic group will be the Hispanic/Latino elders representing 39% of California’s population.
Among California’s elders, there are many diverse languages spoken, and many different countries represented. The diversity in language and cultural differences contribute to the challenges as there 21% are unable to read or write in the English language. This challenge poses a problem for the elderly population when trying to utilize community services or other assistance for the issues they encounter. A culturally competent social worker is trained to understand these differences to include poverty and how it impacts the aging as it pertains to their quality of life. Studies reported that among adults ages 65 and older, 18 percent of Latinos and 19 percent of African Americans lived in poverty in 2014—more than twice the rate among older non-Hispanic whites (8 percent) (Mather, 2018).

The percentage of the older population that is non-Hispanic White is projected to decline from its current 81% to 61% by 2050 (Gelman C. R., 2012). If current settlement patterns continue, future populations of older Americans will increase significantly in the Southwest and Southeast, along with parts of the Atlantic and Gulf coasts, and in cities of the Northeast and Midwest (Gamble et al., 2013). The 2010 U.S. Census Bureau reported that adults age 65 and older make up 13.5% of Georgia’s population (U.S. Census Quick Facts, 2018). Half of rural Blacks live in just four states—Mississippi, Georgia, North Carolina, and South Carolina (Probst, Moore, Glover, & Samuels, 2004), and in recent years, it has become evident that geographic areas with high concentrations of Blacks have greater occupational and health disparities (Troutman, Nies, & Bentley, 2011).

The National Center for Health Statistics (NCHS) 2017 reported that U.S. life expectancy in 2016 was 78.6 years which is a decrease of 0.1 years from 2015. Life
expectancy for females was 81.1 years and for males 76.1 years in 2016. U.S. News and World Report purported that the average African American male lives five years less than the average white American male (Cook, 2015). NCHS (2017) stated that the ten leading causes of death in 2016 were: heart disease, cancer, unintentional injuries, chronic lower respiratory diseases, stroke, Alzheimer’s disease, diabetes, influenza and pneumonia, kidney disease, and suicide. These ten leading causes of death accounted for 74.1% of all deaths in the U.S. Many of the leading causes of death are common among those age 65 and older. Deaths from heart disease, cancer, and stroke declined sharply among blacks 65 and older, and in that age group, blacks now have a lower death rate than whites (Achenbach, 2017).

Wells et al. (2017) research shared demographic information related to dementia stating that recent epidemiological studies have determined 5.2 million adults in the United States have Alzheimer’s disease or other forms of progressive dementia. By 2050, this number is predicted to increase to 13.9 million as those over the age of 65 with dementia is expected to more than double. This research also concluded that African Americans would present with higher prevalence, incidence, and cumulative risk rates of Alzheimer’s and related dementias than non-Hispanic Whites. More specifically, African Americans will experience higher levels of vascular dementia than any other progressive dementia than non-Hispanic Whites.

The new demographic realities necessitate adjustments to current policies as the aging population affects economic growth, formal and informal social support systems, and the ability of states and communities to provide resources for older citizens (Martin,
As an example, research by Henderson, Maniam, and Leavell (2017) showed that sixty percent of retirees rely solely on Social Security for retirement income. Also, workers contributing to payroll tax within the aging population are declining while the number of individuals withdrawing is increasing. In 2010, the Social Security Administration estimated that program costs would rise and by 2035 taxes will cover only 76% of Social Security benefits. This phenomenon has led many analysts to contend that Social Security faces a significant solvency problem, meaning the trust will be unable to pay full benefits on a timely basis.

These types of strains to policies and programs such as Social Security places urgency on the need for specialized social workers who are knowledgeable about the policies and programs. Many more policies and programs have a profound impact on this population’s wellbeing and without the proper strategic planning to reduce adverse outcomes, social and economic systems may experience turmoil. Due to the predictions of a rapidly increasing aging population, these policies and programs must strategically plan for challenges and ensure they represent the specific needs.

**Aging Policies and Programs**

To support the changing demographics, many researchers have suggested policy changes required to enable current institutions to persist and thrive. Henderson, Maniam and Leavell’s research (2017) purported that the 65 and older population will reduce the overall workforce and its productivity and strain on the working age population and various programs such as Medicare and Social Security. As a result, the government will
be forced to make significant alterations to policies, programs, and institutions to support the aging population and society overall. The government will have to consider how popular culture and perceptions of the elderly will impact legislation passed and be prepared to counteract such influences ensuring law adequately reflects the needs.

Research from Bjelland et al. (2010) highlighted the importance of American public policies that have been developed to protect the aging against discrimination. Policies such as the Age Discrimination in Employment Act of 1967 (ADEA) protects employees and those applying for jobs aged 40 and over from employment discrimination based on age. The ADEA prohibits all employers from including private employers, state and local governments, employment agencies and labor unions from discriminating against capable individuals with disabilities in the hiring and retention phases of employment.

For those who are unable to work, researchers such as Krishnamurthy et al. (2014) expressed importance on the Social Security Act (SSA). The SSA was designed to assist with the economic factors of aging providing supplemental income for those who are eligible. The SSA was established in 1935 by President Franklin D Roosevelt to provide financial security to aging citizens and World War I survivors. The SSA is a widely used financial supplement which has been available to meet the needs of residents of the United States for more than 75 years. Dushi, Iams, and Trenkamp (2017) further stressed the importance of Social Security benefits and regard it as the base of retirement income, mainly because the benefits are a steady and a reliable resource for almost all
aging households. Social Security provides an inflation-indexed lifetime annuity to aging beneficiaries.

In 1945, the GSA was created by a small group of researchers to promote gerontology. The GSA focuses on many aspects related to aging to include supporting the development and implementation of knowledge about the challenges of the population. GSA works to advance public health and to provide a community for gerontology professionals of various scientific fields and practitioners. Brown et al. (2013) identified that the number of African Americans in the GSA is not comparable to the population of older African American adults in society. They noted that Dr. E. Percil Stanford, one of the first African American members of GSA, has created minority-based task forces within the organization to ensure minorities are represented not only in the field of gerontology but within GSA initiatives.

Whitelaw (2010) purported that the National Council on Aging’s (NCOA) agenda is to promote the idea that evidence-based healthy aging can be accomplished through a process of planning, implementing, evaluating, and sustaining programs adapted from tested models or interventions to address health issues in an ecological context. NCOA was developed in 1950 and was initially formed to address concerns about rising health care costs and forced retirements. NCOA’s mission is to improve the lives of older adults who are struggling. This organization has worked with various national, state, and local organizations to promote healthy aging and foster the diffusion of evidence-based prevention programs.
Another agency focused on improving the lives of older Americans is the American Association of Retired Persons (AARP). It was founded in 1958 by Ethel Percy Andrus and Leonard Davis out of an organization for retired teachers. The AARP serve older adults by advocating for social change and information sharing to promote change. AARP has grown over the years beginning with less than 50,000 members in 1959 to 5 million by early 1970s. In 2008, AARP grew to 40 million members. AARP benefits provide supplemental insurance to cover the costs that Medicare does not offer. AARP provided a direct benefit to members and, in turn, fought for a generous and resilient program (Hacker, 2015).

In 1965, Medicare and Medicaid were created. Moffitt (2015) purported in his research that Medicare is a health program for older individuals; it is a social insurance program, not a welfare program, but Congress has made all individuals 65 or older eligible even if they have not worked for ten years in the Social Security system. Moffitt pointed out that Medicare was created out of interest group politics. In the 1930s to the 1960’s groups such as the American Medical Association (AMA)—lobbied in in Washington to convince supporters of public health insurance to pay close attention to vulnerable and difficult-to ensure segments of the population which were older Americans above the age of 65. Medicare was passed under Title XVIII of the Social Security Act and was intended to help the aging regardless of economic or medical history (Hacker, 2015).

Moffitt (2015) further mentioned another health care policy which aims to assist with the health care needs of low income, low asset citizens to include older Americans.
Medicaid is a medical care program aimed at helping low-income families which have
grown since 1965. Medicaid was signed into law under Title XIX of the Social Security
Act in 1965. Medicaid health care programs are available in all states, the District of
Columbia, and the U.S. territories. Medicaid supported two-thirds of nursing home
residents across the nation (Applebaum & Koehn, 2013).

The 1960’s era produced many programs and policies to assist older adults with
their diverse challenges, and the Older Americans Act of 1965 was crucial to fulfilling
aging-related needs. This policy was one of the first aimed towards helping older adults
stay independent as possible in their homes and communities. It is a federal initiative to
provide comprehensive services for older adults. One of OAA’s most prominent
programs is Title III Grants for State and Community Programs on Aging. This program
administers funding to State Units on Aging (SUA) and local Area Agencies on Aging
(AAA) for in-home assistance, respite for caregivers, home-delivered meals, legal
services, and preventive health services for older adults. While funding from the OAA is
small compared with the primary source of long-term care (LTC) funding from Medicaid,
it provides a safety net for people who might otherwise not qualify for Medicaid financed
LTC support (Thomas & Mor, 2013).

Roger (2010) presented literary information regarding the Gray Panthers and
described them as an intergenerational organization of mainly elderly political activists
formed in 1970. Roger purported that they formed at a time when older adults were
widely seen as impotent, frail, disabled, demented, or dependent (which was also a
prominent gerontological theory). The Gray Panthers made a name for themselves by
fighting many of the injustices against older adults such as ageism, lack of universal health care, mandatory retirement, protesting the Vietnam War and nuclear weapons, insisting on habitable housing and supporting Social Security and adequate incomes for all.

The National Institute on Aging (NIA) is one of 27 institutes and centers at the National Institutes of Health (NIH) created in 1974. The focus of this organization is to conduct and advocate for research on the health and well-being of older people. Kelley, Bernard, and Hodes (2017) argued that the Institute's advocacy goals are expansive, including the crucial factors that contribute to aging and their impact on systems; diseases and conditions for which aging is a risk factor; and interventions that may prevent, delay, or treat these conditions or otherwise contribute to an extension of healthy, active years of life. Over the past 40 years, the NIA has grown and produced beneficial research partnerships with the federal government and other agencies and continues to do so today.

Channing, Jennifer, and Miliam (2010) expressed the importance of the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA) to the aging population. HRSA was created in 1982 and provides federal funding to implement and maintain Geriatric Education Centers (GECs) in health care facilities across the country. GECs focus on education concerning the care of older adults with: cognitive impairment and end of life needs. GECs also provide a training program for various disciplines on health literacy, equity and works to strengthen their
skills and knowledge on geriatric content. HRSA Bureau of Health Professions provides oversight for all GECs located within the United States.

In Scheinholtz’s (2010) research, it was mentioned that the Substance Abuse and Mental Health Services Administration (SAMHSA) was created in 1992 by the United States Congress as an essential agency aimed at addressing the needs of older adults. SAMHSA’s purpose is to address aging challenges associated with aging biases, treatment programs, and recovery and mental health or substance use. Since 2002, SAMHSA’s Older Adults Mental Health Targeted Capacity Expansion (OATCE) program awarded more than 30 grants. These grants are instrumental in providing mental health services to older adults age 60 and to build systems to support the service system using Evidence-Based Practices.

Doherty, Meyer and Giunta’s (2016) research found it appropriate to mention the LGBT elders in their literature and the importance that SAGE (Services and Advocacy for GLBT Elders) has on the well-being of this population. In 2011, SAGE was developed to provide LGBT cultural competency training for aging and LGBT service providers through its National Resource Center on LGBT Aging (NRC). Doherty, Meyer, and Giunta highlighted that the NRC cultural competency curricula include multiple options for training to include full and half-day in-person training for aging services providers in addition to online Web seminars on LGBT aging.
Older Americans Act of 1965

The Older Americans Act is a crucial policy for social worker reference when working with older adults. This policy is instrumental to the organization and delivery of social and nutrition services to older adults and their caregivers. The Older Americans Act of 1965 (Pub. L. 89-73, 79 Stat. 218, July 14, 1965) is a federal initiative aimed at providing services necessary to help older adults stay as independent as possible in their homes and communities. Services provided include in-home assistance, respite for caregivers, home-delivered meals, preventive health services, and legal services for older adults (Thomas & Mor, 2013). Thomas and Mor’s research showed that states that invest more money in their OAA programs particularly home-delivered meal programs have proportionally fewer low-care NH.

Thomas and Mor (2013) purported that the funding provided by OAA pays for employment opportunities for many professionals to include social workers; however, OAA is always under fire by the government. Each fiscal year, the government considers reducing or eliminating programs supported by OAA a move that can impact older Americans in most states. Blancato and Ponder (2014) argued that the reason that the OAA has fallen into limbo might be due to political stalemates which have impacted Washington for years. There have been times such as in 2011 when OAA was not reauthorized and expired, despite lobbyist advocacy efforts. The reduction or elimination of funding will also reduce and eliminate jobs for social workers.
**Aging Attitudes**

It is crucial for social work students to understand the challenges impacting the aging to include how lifespan expectancy increased dramatically in the late 20th century. Literature by Rayer et al. (2017) stated that this life expectancy increase leads to a corresponding increase in the number of older adults in the labor force. Rayer et al. brought attention to the importance of the term ageism, coined by Butler and Lewis in 1973. This term was first used to describe the process of systematically stereotyping and discriminating against people because they are old. Ageism comprises two components—one, an ageist ideology of negative stereotypes, beliefs, and attitudes, and two, age discrimination, or behaviors that exclude certain people and disadvantage them relative to others solely due to their age (Raymer, Reed, Spiegel, & Purvanova, 2017).

According to Azulai (2014), ageism is usually associated with the poor treatment of older adults. However, ageism can be directed against any group of people, when age is taken as a major attitude-determining factor. Ageist attitudes and beliefs may result in discrimination and social segregation of a group of people based on their age, negatively impacting the quality of life of the stigmatized persons. Therefore, ageism is an important phenomenon to recognize in social work clinical, educational, and research settings.

Societal views toward older people have a substantial impact on this population’s overall well-being. Dasbas and Kesen (2015) believed that various issues are created based on the socio-cultural framework of society. Negative or positive changes in attitudes, behavior and the perception of old age by individuals and society determine the services provided for the elderly. Dasbas and Kesen further identified that ageism
systematically exhibits discriminative behavior towards the aging adding barriers to this population living a quality discrimination-free life. Moreover, they conclude that studies in the literature determined that ageism is caused by social structures and political values, social attitudes, economic framework, and cultural inheritance found in these social structures.

Duffy (2017) purported that social workers must move beyond the status quo social service delivery and change how they advocate for older adults. Duffy mentioned that social workers must focus on improving the dominant language used to describe the needs of older adults so that their needs are adequately depicted in the media and other institutions, ultimately reframing societal ageist beliefs. These changes can help ensure aging policies in such categories of health care and social care services effectively address the actual needs of this population with evidenced-based logic, not ageist rhetoric. Embedding gerontological social work as core learning in social work education is essential to social work achieving what is required to achieve these goals (Duffy, 2017). Milne et al. (2014) also agreed that gerontological social work education needs to be more embedded in the social work curriculum.

Kim et al. (2017) stated that it is beneficial when social work curriculum offers positive perspectives on aging for students. They believed that it helps students go into the field of geriatric social work with reduced aging bias. Kim et al. conducted a study with seventy-two students, 16 of which were Bachelor of Social (BSW) students and 56 MSW students. They presented a lecture which contained positive views on aging and assessed the pre and post perceptions of these students concerning older adults. Results
showed that negative attitudes toward older adults decreased and positive attitudes toward older adults increased among students following their participation in the lecture on the optimistic framing on aging-related issues (Kim, Lee, & Sims, 2017). Kim et al. suggested that focusing on changes in perception at the college level can enhance geriatric social work practice for social work students postgraduation.

**Aging Population Challenges**

Literature by Chen (2016) stated that successful aging consists of having optimal cognitive and physical functioning, an active lifestyle and a low probability of disease and disease-related disability. It is vital for geriatric social workers to understand the challenges impacting older adult’s ability to age successfully. Vélez Ortiz et al. (2012) shared the statistic from the National Association of Social Workers which shows that as of 2006 75% of social workers providing services reported having older adults on their caseloads. Therefore, it can no longer be an optional part of social work education to expose students to the challenges facing older adult populations. They further stated that social workers need to have specialized knowledge in the field of gerontology with some of the main themes of information including the unique needs of older adults, adequate discharge planning in hospitals and the realities of aging overall. This information can be gathered through informal means such reading articles, social media or searching on the internet to enhance understanding as well as formal education.

Having extensive knowledge regarding adults age 65 is important because people are living longer and require help navigating through unchartered territories of life. Bong,
Chen and Berglan’s (2018) research highlighted the reason why people are living longer. They mentioned that the extended years that people tend to live is due to socioeconomic developments and access to better healthcare. Also, fertility rates remain low, and this trend is expected to continue in the coming decades. They stated that evidence is minimal as to if the extended years of life are lived in good health and maximum functioning.

Henderson, Maniam, and Leavell (2017) purported that there are significant amounts of research and publications that describe the impact of population aging and potential solutions to counteract these challenges. They suggested that there are changes needed within the community to support an aging population who have different needs from the current population such as the accessible housing, the opportunity to “age in place” and transportation solutions. Henderson, Maniam, and Leavell (2017) pointed out that if the solutions mentioned above aren’t considered in conjunction with health care spending to support the needs of the aging, a threat to the economy is inevitable.

The economic status of older Americans is a crucial factor when assessing the quality of life. As noted by Lee et al.’s (2014) many studies have found that older Americans reduce consumption to maintain their wealth. They choose to reduce due to reservations regarding health, life expectancy, and the ability to independently live on their own. Their research suggested that the elderly spend more on food, housing, and healthcare—the priority items in their total consumption—and less on transportation, clothing, and household décor. Also, their research determined that in the final two years of life, out-of-pocket medical expenses of married older households were equal to 30 percent of their annual income; for people in the lowest income, that share was equivalent
to approximately 70 percent. Lastly, Lee et al. purported that out-of-pocket medical expenses and the challenges associated with these expenses among the elderly also appear to vary according to income, age, health condition, and insurance coverage.

Ferguson’s (2015) research supported Lee et al.’s stance that healthcare costs among older adults are associated with a high occurrence of chronic disease during the last year of life. Ferguson went further and stated that the baby boom generation is expected to experience a high level of chronic illness as they age; with illnesses exacerbated due to the obesity rate. This literature suggested that social workers with knowledge of aging issues to include chronic disease will be in demand for this population. With chronic illness expected to increase, end of life care will be another area where social workers will be needed to provide support and education to ensure a quality of life for those experiencing chronic illness and their families.

While chronic illnesses among the older population are expected to increase, many engage in illicit drug use which will complicate chronic diseases. Han et al. (2017) purported that the Baby Boomer generation has more reported rates of substance use compared to any previous generation. Their research shared survey results from an International Association for Cannabinoid Medicine that found 30.5% of the 953 participants age 50 and over indicates the top five reasons for marijuana use included anxiety, weight loss, chronic pain, loss of appetite, depression or sleeping disorder, all common ailments of aging. They defined aging as social and physiological changes over time that make older adults susceptible to decreased function, chronic disease, falls and cognitive impairment.
While the Baby Boom population may downplay the physiological effects of cannabis, these effects may gravely impact vulnerable older adults who have multiple chronic conditions. Lung illness and infection can occur with older adults from smoking cannabis merely because they are more vulnerable to such conditions. Han et al. also mentioned that marijuana usage had been linked to cerebrovascular events for which increasing age is a risk factor. They further purported that cannabis use has acute effects on cognitive function and may have residual long-term effects.

Poverty is another challenge for the aging population that social worker must be knowledgeable about to promote quality of life. However, according to the U.S. Bureau of Census (2010), the United States has witnessed substantial reductions in the elderly poverty rate over the last 40 years. Census data showed that the elderly poverty rate (age 65 and older) with gross cash incomes below the poverty threshold, dipped from 29.5% in 1967 to 8.9% in 2009. Even with this decline, roughly 3.7 million older adults across the United States suffer the effects of poverty. If those with incomes below 125% of the poverty threshold are counted, then that number rises to 6.0 million elderly individuals living in difficult economic circumstances (U.S. Census Bureau, 2010). Kim (2013) research argued that the Supplemental Security Income (SSI) program could provide relief for poverty consequences related to older adults with limited resources and income. Kim's literature reported that in 2008 alone, the SSI program distributed nearly $5.4 billion to more than 1.2 million elderly recipients. These funds decrease a substantial amount of the economic consequences for approximately one-third of the poor, elderly population.
Physical and mental health issues specific to older adults are challenges social workers should be knowledgeable about to assist with this population’s needs. According to Ferguson (2015), physical and mental health issues among a growing number of older adults are the primary reason for expected significant growth in informal caregiving needs as the baby boomers age. Ferguson further acknowledged that informal caregiving issues are also a significant factor in the quality of life for both older adults and their caregivers, who may be older adults themselves or the children of older adults. Geriatric social workers can intervene to provide a higher quality of life for caregiving relationships through care management, respite programs, and support groups. Ferguson’s research concluded that other quality of life factors in the future would likely depend on the number of older adults living in poverty and issues related to family dynamics, grief and loss, and isolation.

When caregivers are no longer able to care for their elderly loved one in the home, they turn to institutionalized care, such as nursing homes or assisted living facilities. Nursing home long-term care and rehabilitation services are costly and can put the average American in debt or worse prevent access to quality care. Many older Americans have not planned for long-term care challenges and have neglected to accrue benefits to help sustain the cost. Social workers are crucial in assisting older adults with advance care planning to help anticipate these costs and help identify solutions. The aging of the baby boom generation could fuel a 75 percent increase in the number of Americans ages 65 and older requiring nursing home care, to about 2.3 million in 2030 from 1.3 million in 2010 (Population Reference Bureau, 2019).
Literature from Kim and Gordon (2014) pointed out that not all aging individuals will utilize nursing homes or assisted living facilities for their long-term care needs. Some will have caregivers who can assist with activities of daily living while they remain in their homes. They mentioned that the elder caregiver profile mostly consists of middle-aged and older women who also work full-time. Social workers are instrumental in assisting with finding resources to help caregivers fulfill their duties. Kim and Gordon recommended referral services, adult day care, and emergency care resources to help alleviate the stress of working caregivers.

Some programs such as Social Security, Medicare and Medicaid may offer financial relief for some; however, not all who live in the United States are eligible. Nor do these benefits pay for all costs related to long-term care needs. Many older adults and their caregivers will require assistance navigating and understanding these complicated programs, policies and their benefits. Studies showed a substantial increase of the elderly also means that Social Security and Medicare expenditures will increase from a combined 8 percent of gross domestic product today to 12 percent by 2050 (Mather, 2018).

Wells et al. (2017) mentioned that 80% of adults with dementia have remained in their home as a result of caregiving support. They provided statistics which indicate that in 2014, approximately 15 million family members and other unpaid caregivers provided an estimated 17.9 billion hours of care to people with dementia, a contribution valued at more than $226 billion. Caregivers are very involved in the daily tasks for those with dementia to include dressing and bathing, providing transportation and managing difficult behaviors. Wells et al. differentiated caregiving demands based on race and ethnicity.
They stated that while caregiving demands are high across all races and ethnicities, African American caregivers provide a higher percentage of hours of care, engage in more demanding caregiving tasks, such as bathing and lifting, and are more likely to report inadequate access to support services. Furthermore, African American caregivers spend a disproportionately higher percentage of their monthly income on dementia care recipients needs than non-Hispanic White CGs (Wells et al., 2017).

Research from Kim and Gordon (2014) supported Well et al.’s assertion that the demands of caregivers can be overwhelming and require resources to help them fulfill their roles. Kim and Gordon asserted that caregivers who are employed require more support from their employers and will need social workers to advocate on their behalf. Employers can assist caregivers by offering more work options to allow employees more time and more flexibility at work to be able to manage their elder caregiving responsibilities. Kim and Gordon also asserted that caregivers should receive benefits which will allow them to: take an elder to a doctor's appointment, go grocery shopping during the day, or leave work to handle a crisis without feelings of guilt associated with choosing elder care responsibilities over work responsibilities. They purported that these changes within the work environment will increase employee well-being and thereby reduce employee stress while allowing them to care for their elderly loved ones.

Social workers should be aware of the health challenges impacting aging individuals. According to Mather (2018), one of the most debilitating health ailments impacting aging adults is dementia. The health outcomes of the aging place social, biological, psychological and financial demands on the individual, their caregivers and
greatly affect community resources. The surge in dementia-related cases require the professional management skills of educated and trained professionals who can ensure to meet the demand for elder care while enhancing the quality of life of people living with dementia. Mather (2018) purported that the need for elder care will be driven by a steep rise in the number of Americans living with Alzheimer’s disease, which could nearly triple by 2050 to 14 million, from 5 million in 2013 (Mather, 2018).

Social workers are needed to educate dementia suffers and their caregivers about dementia-related behavioral changes which may impact the quality of life and require support. Research from LaLonde, Zimmermann, and Poling (2015) stated that many older adults with dementia exhibit significant impaired behavioral expressions, such as impoverished social interactions, eloping or wandering, physical and verbal aggression, disruptive vocalizations, limited ability to independently access preferred objects and activities, and inability to communicate needs and wants. They further expressed that these problems frequently occur in both in-home and nursing homes setting, pointing out that these behavioral expressions can happen in any living environment.

Social workers specializing in geriatric social work will need to understand the trends and challenges as they impact diverse populations is an important part of being culturally competent. According to the research of Troutman, Nies, and Bently (2011), the fastest growing subgroup in the Black population is older adults. The number of older American among African Americans is expected to triple within the next 50 years. They further stated that health disparities between older adult ethnic and racial groups are increasing. Thus, growing numbers of Black older adults may be at risk for not aging
successfully. They attributed this to various complex factors including being at the highest risk for disease and disability.

Research from Gitlin, Roth, and Huang (2014) supported the assertion that African Americans experience debilitating conditions at a higher rate. Depression in older adults is a debilitating condition that heightens the risk for functional decline, comorbidity, poor quality of life, dementia, and mortality. They have identified that older African Americans are one of the fastest growing minority subgroups of the aging population. They purported that older African Americans are at risk for depressive symptoms due to their increased rates of chronic illnesses and exposure to other barriers and chronic adversities including: limited access to essential resources, low income, inadequate housing, and unsafe neighborhoods, as well as a history of discrimination, all factors that increase stress and risk for depression.

An important aspect of aging is the development of a plan in the event an individual is unable to make decisions for themselves engaging. Assisting with advance care planning is a crucial aspect of being a geriatric social worker. Research from Davis (2013) brought attention to the Patient Self-Determination Act (PSDA) which passed in 1990. This act serves as a promise to patients that if they expressed verbally or through advance directives the desired level of care they wish to receive at the end of life, that their wishes will are honored. Davis’s research showed that African Americans have the lowest percentage of completed advance directives as compared to other racial groups in the United States. Davis purported that the African American elderly population rely on
community supports such as social workers and the church to meet resource, physical, spiritual and other needs related to their activities of daily living.

The African American elderly experience is unique and complex when compared to the experiences of other elderly populations in America. Understanding how religion and spirituality impacts the older African American population can assist social workers with ensuring this population ages according to their cultural preferences. Social work curriculum must ensure social workers develop cultural competence and understand culture-specific traditions and ways of coping with stressors. A study by Williams, Keigher, and Williams (2012) concluded that for African American elderly in Milwaukee, involvement in religion and spirituality activities is likely strongly linked to perceptions of their wellbeing and positive quality of life.

Spiritual beliefs in the African American community are strengths often used in coping with major challenges in life. Their study concluded that the use of spirituality for coping is particularly true for older African American women who place spirituality at higher levels of importance in their lives than did men. Their research respondents indicated that prayer, faith, and belief in God provide them with the needed guidance for coping with stress, adversity, and challenges. The peace elderly African Americans find in being able to give their burdens to God may help to remove feelings of distress which may negatively impact both their psychological and physical well-being. Social networks and social interactions, so much a part of the religion/spiritual experience, promote well-being by providing access and avenues to support from others (Williams, Keigher, & Williams, 2012).
Geriatric Social Work Interest

Aging population growth trends are resulting in a demand for professionals with knowledge and expertise in aging. However, Mallers and Ruby (2017) argued that many have limited or inaccurate knowledge about gerontology and aging-related issues, proving to be an issue because this population requires skilled and trained professionals ready to meet their needs. Mallers and Ruby (2017) also added that the growing population of older adults currently outnumbers the number of trained persons who can assist. Their research purported that there is not a lot of information about the training and experience of professionals who work with or on behalf of older adults. A baseline understanding regarding attitudes, training, and knowledge of aging is essential to developing and promoting critical aging-related curriculum and programs. Their research further explained that the current health care system is already overwhelmed by demands for gerontological care. Also, those specializing in the care of older adults cannot meet the current demand let alone the projected needs for eldercare.

Olson (2011) suggested that contemporary social workers have relinquished their responsibility to address society’s most vulnerable populations and complex problems. Olson (2011) stated that of concern is the fear that some of the most challenging social problems such as poverty, homelessness, and the needs of the growing aging population, may attract fewer professionals willing to work with these issues. Only 3% of MSW students typically select an aging or geriatric social work concentration (Dakin, Quijano, Bishop, & Sheafor, 2015). Velez Ortiz et al. (2012) provided similar percentages stating that estimates range that between only 2.3% to 5% of undergraduates report an interest in
working with older adults. They further indicated that gerontological social work ranks fifth after other fields such as mental health, health, family services, and child welfare. Agencies serving older adults report that a severe lack of qualified applicants, along with inadequate salaries and insufficient numbers of ethnically diverse applicants, is a key barrier to hiring personnel (Gelman C. R., 2012).

Darkin et al. (2014) shared that during the 1990s the Social Work Leadership Institute (SWLI) at the New York Academy of Medicine developed a comprehensive plan for developing a skilled workforce of specially trained geriatric social workers. The challenge identified during the time SWLI developed the plan was that few social work students were pursuing careers in aging and many who did have experience were retiring. Furthermore, many MSW programs did not have aging specializations, and employers were reporting that many social workers employed in aging settings were unable to “hit the ground running” (Dakin, Quijano, Bishop, & Sheafor, 2015).

Research from Ferguson (2015) reported the varying study results concerning social worker interest in working with older adults. One study reported that interest in the field varied from a low of 4% of the respondents who "definitely" planned to work with older adults to 48% of respondents in another study reporting high or moderate interest in working with older adults. Ferguson expressed that in another study, however, 20% to 30% of respondents expressed high interest in the field. Ferguson concluded that these results might indicate that geriatric social work interest is not as low but moderate. One of the challenges with increasing social work student interest in the field is the broad nature of the social work profession, allowing students to have so many choices. There
are at least four broad age cohort populations and many social problems to study. As a result, interest among students is extensive.

Research from Ferguson (2012) showed that ageism might be a contributing factor to the low amount of interest among social workers to practice in geriatric settings. Ageism is a term defined as negative attitudes and behaviors toward those who are perceived as old in our society. Ferguson purported that college students assume that work with the older population is only necessary with the institutionalized dependent patient who may have debilitating disabilities, are confined to bed, or who have cognitive limitations. These attitudes undervalue the geriatric social work profession and discourage graduates from pursuing work in agencies that serve older adults.

Literature from Ferguson (2012) went on to stress that when attitudes correlate to interest in working with the older population, more positive attitudes are related to more significant interest in the field. Among graduate students surveyed, Ferguson purported there is a significant relationship between student’s more positive attitudes toward aging and greater interest in geriatric social work. Ferguson’s literature expressed that experience with the older population is thought to be important for both improving student attitudes toward older adults and increasing interest in geriatric social work. The conclusion expressed by Ferguson’s literature is that social work students who report more experience with the older population have more positive attitudes about older adults. Ferguson contended that there are a small number of studies that compare one’s knowledge of aging and interest in working with the older population. These studies have
generally shown knowledge of aging is related to increased work with the population
(Ferguson A., 2012).

Gelman (2012) conducted a study to explore 1st year MSW student reactions and
experiences to their gerontological field placements. They interviewed students before
and near the end of their placement experience. The findings from the interview showed
that all respondents reported a reduction in stereotypes, improved appreciation of older
adults’ capacities and strengths, and increased skills in working with this population. All
but one respondent reported an increased likelihood of pursuing a position working with
older adults as a result of exposure through field placement (Gelman C., 2012).

Student interest can be developed through various means to include formal
education, establishing a link between knowledge and employment, presentations in
introductory courses by gerontological social work practitioners, faculty modeling,
research opportunities, partnerships between social work programs and aging agencies,
and offering financial incentives (Vélez Ortiz, Cross, & Day, 2012).

Informal knowledge is gained through a variety of informal learning experiences
to include volunteering, work experience, the internet, social media, and observations; all
of which can be self-directed. Self-directed learning is considered by many as the most
appropriate methodology to allow practitioners to stay up-to-date and knowledgeable of
the current literature (Murad, Coto-Yglesia, Varkey, Prokop, & Murad, 2010).

Unscheduled meetings, after-work social events, and conversations are informal
knowledge sharing tools that promote social interaction and networking. Schwaer,
Biemann, and Voelpel (2012) purported that acquiring informal knowledge and the
process of sharing such knowledge differs but overall is a voluntary act. Acquiring formal knowledge is gained through deliberate and structured formal methods such as attending a college program, i.e., an MSW geriatric social work program. They further stated that informal knowledge gathering and sharing helps people achieve work-related, personal and social goals through unofficial channels.

Kyndt et al. (2014) similarly pointed out that learning and acquiring knowledge does not occur through only education and training means. They stated that informal learning acquired through work activities could help individuals change because of information gathering that will help them achieve individual and organizational goals. Ünlühisarcıklı’s (2018) literature suggested that informal learning is often self-directed or incidental. Self-directed learning is both intentional and conscious, whereas incidental learning is unintentional but conscious classroom-based, and highly structured whereas informal learning is characterized by the absence of these (Ünlühisarcıklı, 2018). Ünlühisarcıklı’s research concluded that the workplace is the perfect example of an environment to gain informal knowledge. Outcomes showed that graduate student employees gained valuable knowledge by engaging in various work activities, striving to achieve goals and networking with colleagues and leadership. Interestingly, academic social work education and practice learning appear to be placed in opposition to each other while the literature on informal learning has argued that neither types of learning are sufficient by themselves to cope with a continuously changing practice and context of social work (Kyndt, Govaerts, Verbeek, & Dochy, 2014).
Chen (2016) used interviews to research the value of volunteering as a method of informal learning. The participants concluded that volunteering could be holistically beneficial as they, the volunteers, successfully age themselves. Through volunteer means, geriatric social workers can gain a sense of purpose impacting physical, psychological, social, and spiritual dimensions. Through this experience, volunteering benefited the volunteers’ self-defined successful aging by (a) establishing a substantial and expanding life, (b) building and improving relationships, (c) enhancing positive changes and self-evaluation, (d) promoting physical and psychological health, and (e) triggering treasures and preparations for the rest of life (Chen, 2016).

Gleason’s (2017) literature focused on the value of social media as it relates to informal knowledge. Gleason purported that through online and offline activities like live-tweeting the latest political news or soliciting for funding for a community need, young people demonstrated their interest in participating in actions that connected them to others and found it enjoyable. Through these tweets, they are acquiring informal knowledge by processing the information placed in the tweets.

**Geriatric Social Work Education**

As social work education is under consideration for revising throughout the country, it is imperative for educators to consider the growing aging population and incorporate structured gerontology elements within MSW programs. Tompkins et al. (2011) examined the needs of social work students and argued that the growing number of older adults within our nation compels social work educators to ensure their students
graduate with basic competencies in working with elders and their families. Tompkins et al. (2011) concluded that aging infused content such as readings, paper assignments, guest speakers, lectures, role plays, and field trips be included to help students develop social work competencies that not only apply to the aging but across various populations and practice settings.

**Curriculum**

Since 1998 the John A. Hartford Geriatric Social Work Initiative (GSWI) has tried to infuse gerontological knowledge into curricula for social workers through the Council on Social Work Education (CSWE) National Center for Gerontological Social Work Education (Gero-Ed Center). One of the ongoing issues related to education for social workers in aging is whether the infusion of content or specialization is optimal (Damron-Rodriguez, Goodman, Ranney, Min, & Takahashi, 2013). Research has indicated that not enough programs at the BSW the MSW level provide substantial training in geriatrics and gerontological social work (Gelman C. R., 2012).

Damron Rodriguez and colleagues (2013) expressed that early national surveys of schools of social work created standards to measure the development and adequacy of aging curricula. They reported that in 1988 the California Geriatric Education Center (CGEC) surveyed all baccalaureate and graduate social work programs. The CGEC survey developed a prototype for assessing the level of curricula development. Elements measured included courses, students, faculty, field faculty, and field placement sites. Damron and colleagues shared that the surveys concluded that only 3% of graduate
students took an aging class. They stated this statistic had been used by various researchers to illustrate the significance of competent geriatric social workers and to increase the incorporation of gerontology content for all social workers.

The development of standards to establish and define aging content in the curriculum has been a priority for various social work organizations. Competency-based accreditation standards that establish and define practice behaviors were created by the Council on Social Work Education (CSWE) in 2008. Tompkins et al. (2011) expressed that to implement the 2008 accreditation standards initiative, faculty throughout the country used curriculum mapping strategies to review and critique current course content and assessment measures. CSWE has a National Center for Gerontological Social Work Education and thus has the expertise to head such an initiative. This center offers faculty development opportunities and curriculum resources to promote gerontology competence at the generalist level. Through the curriculum mapping process, faculty can determine how to include gerontological social work competency achievement among their students while meeting the 2008 Educational Policy and Accreditation Standards requirements (Tompkins, Ernst, Ihara, & Clark, 2011).

Tompkins et al. further stated that curriculum mapping provides value to the curriculum development process through the identification of competencies and practice behaviors gaps. This process provides opportunities for faculty to develop new curriculum content that is most important for social work student skill development. Curriculum mapping allows faculty to create or identify assignments to rate students’ achievement of competence. Also, curriculum mapping can also be used to produce new
assignments or alter existing ones so that students can demonstrate learning related to specific geriatric practice behavior. The outcomes and faculty evaluation of such assignments can ultimately be useful as part of various assessment tools for the program. Literature from Tompkins et al. suggested that if social work programs use this process, it can help them decide if current gerontology courses should continue to be offered and new courses established.

In conjunction with curriculum mapping, geriatric social work education is enhanced by using competency-based education (CBE). CBE allows students to progress based on their capability to master a skill or understand a concept based on their own pace. Bonifas’ (2014), suggested that the development of CBE can be credited to the recognized need for public accountability by leaders within the social work profession. Bonifas further suggested that competency-based methods provide a clear outline of what students will learn, what knowledge professors intend to share, what skill sets clinicians must master, and what clients and those who make policy can expect from social workers. All schools of social work in the United States must ensure their curricula meet, the Council on Social Work Education’s (CSWE) policy and accreditation standards (EPAS) to be an accredited program. These standards support CBE by ensuring measurable practice behaviors encompass knowledge, values, skills, cognitive and effective domains within the EPAS.
Field/Experiential Learning

Vélez Ortiz et al. (2012) purported that the increase in the aging population, medical advances, and changes in the delivery system of health care will change the way social workers provide services. They purported that students need to interact with older adults to better understand the issues facing this growing population and to be able to identify their strengths. They shared that optimal field and experiential learning can take place in adult day care, hospitals, long-term care, and mental health facilities.

While it is important for schools of social work curriculum to embody CBE, field education is equally as important for the development of competent geriatric social workers. Gough and Wilks’ (2012) literature purported that schools of social work in the United States are adding a gerontology-specific rotational field placement (RFP) track to their field programs. Within a specific academic year, RFP’s allow students to move through multiple internship locations to experience more than one aspect of social work. In the context of gerontology, RFP program goals are multi-fold: maximizing student exposure to the continuum of care across multiple service settings; increasing student experience working with diverse client populations; and facilitating the development of the cross-disciplinary team collaboration skills required for gerontological social workers (Gough & Wilks, 2012). RFP expose geriatric social work students to the intricacies of current gerontological practice. Gough and Wilks's literature purported that RFP programs are useful as a way to stimulate student interest in gerontology careers as empirical studies to show that RFP students complete their degrees with a more positive view of gerontology-focused working environments as compared to traditional field
placement students. Holosko and Skinner’s (2015) literature confirmed that schools of social work should focus on their field educational development stating that the field is now better positioned in the “front and center” of all current and future accredited curriculum.

While curriculum and field experiences are essential for schools of social work to develop so is adopting a learning model to generate student interest in geriatric social work. Gray and Walker (2015) shared that Model of Domain Learning (MDL) can be used to explain the interconnectedness between prior knowledge, interests, and learning strategies when a student is engaged in a specific domain or topic area such as geriatric social work. MDL is a conceptual framework that defines learning as a process that encompasses both cognitive and affective components. Therefore, the MDL framework believes that as students become more interested in geriatric social work, they learn more, and interest is increased as a result of greater knowledge. MDL also believes that experiential learning activities coupled with the proper role modeling is shown to be effective strategies for achieving effective outcomes (Gray & Walker, 2015).

Cheung and Delavega (2014) expressed the importance of experiential learning for adult learning and mention that it is an effective educational tool in both classroom and practice settings. They further purported that experiential learning utilizes various modes of knowledge acquisition and skills applications and thus bridging identifying issues with applying the skills and knowledge needed to address the issue. This process has been the most utilized and recognized model of experiential learning, known as Kolb’s Learning Cycle. Kolb’s model is called the Experiential Learning Cycle and
consists of four main learning phases, namely, Concrete Experience, Reflective Observation, Abstract Conceptualization, and Active Experimentation. As an experiential learning process, these four phases permit the learner to get experience from concrete activities and reflect on the experience, while utilizing the experience to conceptualize knowledge and understand how to apply abstract knowledge to active experimentation (Cheung & Delavega, 2014).

It is possible for geriatric social work education to be valuable by the incorporation of experiential learning activities and quality exposure to the older population. This process would allow students the opportunity to create close relationships with their clients. Ferguson’s research (2010) indicated that contact with the older population is not a predictor of interest in the field, but closeness to an older adult is a predictor. Ferguson purported that opportunities to develop meaningful therapeutic relationships with older people who have varying abilities and needs while still, a student may influence them to consider gerontology as a career choice. Role modeling of meaningful therapeutic relationships is also important for the development of generating interest in gerontology. Watching others work with older people in diverse settings may provide valuable insight and knowledge about the group. Ferguson’s literature suggested that Social Learning Theory supports indirect learning such as observations to reinforce concepts taught to students.

Another method of exposing students to geriatric social work is the use of standardized patient (SP) role-play, a form of experiential learning. Scenario-based role-playing is a common practice used in social work education. SP combines scenario-based
role-playing with a standardized patient approach. This method is particularly beneficial to social work education as it teaches and evaluates the ability of social work students to conduct an appropriate mental status exam. SP uses a rubric to assess student performance and allows for evaluation data to be gathered which can help determine student abilities. Emlet (2010) suggested that using this technique in a geriatric social work elective course would help improve the skills and understanding of students in interviewing older adults.

Emlet expressed that the use of interviewing and role-playing in social work education is a basic social work skill used to understand a client and their situation. Role-play as a tool for teaching has value as it is inexpensive to use and can illustrate simple to complex education content. Emlet suggested that role-play is a commonly used pedagogical tool for teaching interviewing skills and is a safe way for students to develop geriatric assessment skills.

**Transformation Leadership**

Social work educators and administrators could inspire student interest in gerontology through various forms of leadership to include transformational leadership. Social work history in the United States is full of leaders who have made a profound difference within the profession. Leaders such as Whitney M. Young Jr., Georgia Edmund Haynes, Mary Church Terrell, Thyra Edwards, Lester Blackwell Granger, and Dorothy Height are African American leaders who paved the way for the social work profession. The more well-known leaders such as Dorthea Dix, Jane Addams, Ida
Cannon, Florence Kelly, Paul Kellogg, and Grace Abbott also helped shape the social work profession. These leaders have shown strength and empathy by advocating for vulnerable populations — these pioneers led by advocating, reforming, transforming, reflecting and, most important, giving names, voice, hope, and inspiration to the clients and communities they served (Holosko M. J., 2009). These are the very leadership skills social work educators should display and teach to social work students through transformational leadership.

Transformational leadership is concerned with the development of the fullest potential of individuals and their motivation toward the greater good vs. their self-interests (Breshears & Volker, 2013). Social work educators, in keeping with the definition of transformational leadership, model the qualities needed to empathically and compassionately serve vulnerable geriatric clients while in an academic setting. Modeling, social gerontology course content and internship experiences can teach students to reframe negative biases.

There is a common consensus within the social work profession that the incorporation of leadership models into social work curriculum is important. Social workers should be taught leadership skills to use with clients and for career growth. The principles of transformational leadership appear to fit well with several facilitative leadership and social work values. Transformational leadership has been described as collaborative and strengths-based; it values individuals and is empowering (Breshears & Volker, 2013). Transformational leadership is the approach whereby a leader utilizes charisma, inspiration, intellectual stimulation, and individualized attention with their
employees. Transactional, transformational, and distributed models of leadership appear to be those described most commonly by scholars aiming to advance leadership in social work and social care. (Lachini, Cross, & Freedman, 2015).

Literature from Tafvelin, Hyvonen, and Westerberg (2014) also contended that social worker leadership skills are important skills to develop. Their research described transformational leadership as an important strength in which the leader inspires visions and encourages followers to transcend their own goals and interests for the collective good and increases follower awareness and understanding of moral values. They purported while it is difficult to train students in leadership; their study gives support for transformational leadership having a positive effect in social service organizations. Their study supported a direct and positive effect of transformational leadership on both employee role clarity and commitment. When employees spent a lot of time observing the leader, the impact of transformational leadership was stronger on both role clarity and commitment (Tafvelin, Hyvönen, & Westerberg, 2014). When translated into an educational setting, it is possible that when students spend extended time with a transformational leader (professor), their role and commitment as a social worker can be more enhanced and stronger.

Theoretical Framework

The theoretical frameworks used to guide this study and the analysis of the variables were a mixed approach. Interest is the dependent variable of this study while the independent variables are: aging attitudes, informal knowledge, and MSW education.
exposure. The two theoretical frameworks Social Cognitive Career Theory and the Afrocentric Perspective were incorporated to explain the relationship between the variables in this study. The purpose of this study is to examine the factors influencing MSW student interest in geriatric social work. The two theoretical frameworks discussed apply to how people acquire knowledge, skills and shape interest. Mallers and Ruby (2017) purported that a baseline understanding regarding attitudes, training, and knowledge of aging is essential to developing and promoting critical aging-related curriculum and programs. Considering these theories during the development of geriatric social work education along with understanding student’s perceptions regarding interest in the field can generate data relevant to increasing the pool of competent geriatric social workers.

Social Cognitive Career Theory

Ayub et al. (2017) explained the importance of Social Cognitive Theory (SCT) which was developed in 1986 by Albert Bandura. SCT defined the way individuals acquire knowledge and generate interest. SCT focuses on one’s ability to adapt, develop and change and is influenced by one’s perspective which is exercised individually (Ayub, Kokkalis, & Hassan, 2017). SCT asserts that learning occurs because of social give-and-take interactions. It assumes that an individual can acquire knowledge partially by observing others within the context of social interactions, experiences, and outside media influences. Olson (2011) purported that social work leaders and educators must consider the impact of students' perceptions regarding their ability to intervene in complex social
problems. Also, Olson's literature suggested that one's level of confidence to successfully carry out specific skills can have a major impact on educational and career decisions. The Social Cognitive Career Theory (SCCT) was created from an expanded SCT to include the career behavior process (Dos Santos, 2018). Dos Santos (2018) summarized that the SCCT believes that individuals tend to select their career pathway based on cultural, social, and economic factors.

SCCT focuses on the learning models and cognitive behaviors assisting individuals with (a) the formation and elaboration of career-related interests, (b) selection of academic and career choice options, and (c) performance and persistence in educational and occupational pursuits (Dos Santos, 2018). Dos Santos stated that an individual’s interest and self-efficacy are encouraged as they engage in success-oriented actions, which also increases opportunities for goal achievement. For example, success-oriented actions can be choosing career goals such as geriatric social work. Thus, SCCT as a theoretical perspective can be used to understand MSW student interest in geriatric social work. Dos Santos (2018) further purported that SCCT is used to help individuals understand student higher education experiences as a result of influences from friends, family members, teachers, peers and other personal connections within the higher education environment. In this study, the independent variables “informal knowledge” and the experiential learning component of the variable “MSW education exposure” related to MSW student learning experiences through interactions with others and how this factor impacts their interest in geriatric social work.
According to Dos Santos (2018), SCCT asserts that social, cultural and economic environmental factors can impact an individual's self-knowledge and opportunity outcomes. A student's decision making can be affected by unsupportive and discouraging environmental factors (Dos Santos, 2018). Unsupportive and discouraging social environmental factors such as ageism could negatively impact a student’s geriatric opportunity outcomes and interest in geriatric social work and career selections. Learning negative stereotypes about the aging population is not particularly beneficial when trying to persuade students to see the value older people add to society and the benefit of geriatric social work. Therefore, there is an opportunity for MSW programs to change the perceptions of students by offering a culture that supports geriatric social work.

The environmental influence of an MSW program’s culture is another example of how a cultural environment could impact MSW student interest in geriatric social work. Environmental influence has two core types: (1) background influence forming goals, self-efficacy beliefs, interests, and expectations, and (2) personal influence affecting one’s career selection immediately (Dos Santos, 2018). An MSW program not enriched with geriatric images and discussion, social work curriculum or experiential learning opportunities could negatively impact the student's opportunity outcomes. Kim et al. (2017) purported that it is beneficial when social work curriculum offers positive perspectives on aging for students. They believe that it helps students go into the field of geriatric social work with reduced aging bias.

SCCT can be used to assess student interest in geriatric social work and give license to explore student self-efficacy as it pertains to motivation. SCCT could also be
useful when evaluating the MSW curriculum and experiential learning opportunities to ensure they aid in producing an environment that inspires student motivation to pursue geriatric social work interest and careers. Part of this study is to determine if informal knowledge and formal MSW education impact student interest. How students learn and make decisions is important to explore. The SCCT could be the MSW program’s theoretical framework while developing course content, ensuring delivery of curriculum and practicums consider this theory’s principles.

**Afrocentric Perspective**

The second theoretical framework for this study is the Afrocentric perspective. The Afrocentric Perspective is a culturally grounded social work practice-based model that affirms, codifies and integrates common cultural experiences, values, and interpretations that cut across people of African descent (Wright, White, Jones et al. 2018). The basic principles of this perspective are founded in a holistic worldview and promote circular thinking. Fairfax (2017) purported that the Afrocentric perspective stresses the interconnectedness of all things and focuses on self-knowledge as the basis for all knowledge. Infusing the Afrocentric perspective within gerontology curricula could promote a culture of culturally competent geriatric social workers. Exposure to the basic tenants of the Afrocentric perspective shared within the MSW geriatric program could allow students to connect to the content and generate student interest.

Wright, White, Jones (2018) purported that the Afrocentric Perspective prepares students to address specific psychological, social, spiritual, and economic problems
experienced by people of African descent and to address problems confronted by all people. Earlier research from Schiele (1997) indicated that the Afrocentric perspective’s basic mission within social welfare is that there should be a guarantee of equitable opportunities for all people in society to maximize their talents and skills. Everyone is believed to have the civil, but more importantly the moral, right to work, decent housing, and adequate food and clothing (Schiele J. H., 1997). However, historically, society has neglected the human rights of older people, and they would often be overlooked or experience discrimination. The Afrocentric perspective's belief that all are worthy of equitable opportunity and deserve respect is an important concept to help social workers reverse ageist beliefs.

Wright, White, Jones (2018) introduced the 10 Concepts of Afrocentric Perspective that apply to the development of competent social work practice. The 10 Concepts of Afrocentric Perspective are humanistic values, autonomy, strengths perspective, matrix roles, spiritual balance, collective view of self, universalistic and particularistic outlook, the significance of self-knowledge and personal experience, validation of circular and linear logic, and intuitive. Wright, White, Jones (2018) asserted that these 10 concepts should be utilized when working with populations at risk for marginalization or other varying forms of oppression and it useful at the micro, mezzo, or macro level.

Social workers should have a fundamental understanding of humanistic values, autonomy, strengths perspective, significance of self-knowledge and personal experience, and validation of circular and linear logic to adequately serve diverse populations such as
aging adults. Wright, White, Jones (2018) believed that humanistic values place priority on ending human oppression and enhancing human potential which is important for the elimination of ageism. Also, another valuable skill for the elimination of ageism is autonomy. Autonomy is the freedom of self to confront and not conform to racial oppression and eliminate all forms of human oppression, which is a strength needed for advocacy efforts (Wright, White, Jones 2018).

Within the Afrocentric perspective’s 10 Concepts is the promotion of circular thinking. Moving away from linear thinking and promoting circular thinking can generate ideas to help improve the way society portrays age in daily conversation, and in the media as these images impact how society chooses to support the elderly (Fairfax, 2017). Society should emphasize the fact that improving the lifestyles of senior citizens benefits the whole family and community. Wright, White, Jones (2018) defined the strengths perspective as the ability to identify group characteristics that can be conceived favorably and as a source of resiliency and human advancement. Geriatric social workers with an understanding of strengths perspective could help society value older adults and find ways to keep them integrated within society by highlighting strengths. Elderly relatives can contribute to childcare, and their wisdom can add value to the family structure's development as they grow. Social Workers who understand the needs of the aging can advocate on their behalf to ensure images in society are favorable while showing society the value of older adults.

A professor could teach the Afrocentric perspective to students by incorporating it into their educational experiences. The purpose would be to ensure students who work
with the aging population are trained to provide services that are culturally competent and considerate of the holistic rights of their clients. According to Wright, Jones, and White (2018), one of the Afrocentric perspective’s main purpose is to seek to bring about an understanding that human beings are not separate from their lived experiences or cultural worldviews, consideration of this fact should be at the forefront of social work services. The Afrocentric perspective is a valuable perspective to counteract ageist biases and attitudes because of its fundamental beliefs in the strengths perspective. In Afrocentric social work, everyone is believed to have civil rights but, more importantly, a right to work, to acquire decent housing and adequate food and clothing (Schiele J. H., 1997).

However, according to Schiele (1997), within American history, civil rights had not always been available for the aging population. Older adults have been consistently portrayed as frail, non-valuable and have had their rights stripped away. Therefore, the Afrocentric perspective is important for geriatric social workers to infuse in service delivery and for schools of social work to incorporate in the curriculum as a way to counteract ageism.

The Afrocentric perspective’s fundamental principles of spirituality, interconnectedness, self-reliance, self-knowledge, fundamental goodness, language, and oral tradition and communalism are important concepts for geriatric social workers to comprehend. Comprehension of these concepts helps social workers provide comprehensive services to their clients. Comprehension of these concepts also ensures social workers are culturally sensitive to the needs of their clients. Cultural sensitivity helps build rapport and also demonstrates to the client that the social worker genuinely
cares about their wellbeing. It is important for geriatric social workers to have an understanding of the significance of self-knowledge and personal experience because one’s emotions, lived experiences, and values are the basis for generating knowledge and affecting positive human transformation (Wright, Jones, & White 2018).

Wright, Jones, and White (2018) purported that as one acquires informal and formal knowledge, understanding the pitfalls of linear logic is needed to embrace and affirm a holistic method of knowing, which is the premise of the concept, validation of circular and linear logic. Figure 1 depicts how geriatric social work interest connects to the theoretical frameworks SCCT and Afrocentric Perspective. It also explains how aging attitudes, informal knowledge, and formal education impacts geriatric social work. The SCCT and the Afrocentric Perspective are theoretical frameworks used to describe human social learning processes which apply to how people acquire knowledge, skills and shape interest. People acquire knowledge, skills and shape interest through influential aging attitudes or implicit biases as well as informal knowledge means. Examples of means to acquire such knowledge, skills and interest are through employment and volunteering. Knowledge, skills and the shaping of interest is also acquired through formal education such as curriculum and experiential learning opportunities.
Aging attitudes refers to fixed ways of thinking, feeling or stereotypes about those age 65 and older that affect our understanding, actions and decisions in an unconscious manner.

Informal knowledge refers to information acquired through personal experience other than formal education. These include self-driven methods such as reading books, social media, internet searches, employment, caregiving, volunteering, observations of friend’s experiences.

Formal Education refers to coursework, field experience, modeled professor/staff interest and leadership, and MSW environmental culture.

Social Cognitive Career Theory: Belief that learning and career selection occurs because of social give-and-take interactions. It assumes that an individual’s career selection is a result of social interactions, experiences, and outside media influences.

Afrocentric Perspective: Is a mode of thought and action in which the centrality of African interest, values and perspectives predominate. The Perspective acknowledges African cultural resiliency of family, spirituality, community solidarity, empowerment, creativity and the concept of mutual-aid, as a foundation to help social work practitioners solve pressing social problems that diminish human potential and preclude positive social change. The Perspective counteracts ageist biases because of its basic ideas of unity and the acceptance of differences.

Figure 1. Geriatric social work interest conceptual model.
Summary

This chapter provided an overview of aging, geriatric social work, and elements of formal MSW education to establish a need for exploring MSW student interest in geriatric social work. This chapter covered a historical review of geriatric social work, aging demographics and statistics, and aging policies and programs. This chapter provided the most recent literature relevant to the variables in this study to include: aging attitudes and implicit biases, informal knowledge, geriatric social work interest, and geriatric social work education. Lastly, this chapter described the theoretical frameworks used to explain the relationship between the variables in this study.

The use of the most current literature while constructing this literature review was done as it is best practice to use recent studies as references. Referencing the most current information which has built upon older literature shows how the concepts discussed in this study have evolved. This study is designed to add to the already published body of literature related to MSW student interest in geriatric social work. It is using earlier studies provided insight into historical information that provided a foundation for the study.

Older studies for social topics contain perspectives which may be reflective of the country’s climate during the period in which the research was conducted. Reviewing literature from various periods allows the reader to gain a better insight into the climate especially when reviewing historical literature. The use of history provides the most significant foundation for the development of current social issues and research. A mix of citing new and older literature together can illustrate the studies relevance through a continuum of time.
This researcher’s interpretation of the literature will contribute to the field of geriatric social work. The information presented in the literature review focused on how important geriatric social work knowledge is to build specialized and knowledgeable practitioners. Information regarding cultural competency, specifically for African American’s, was incorporated into the literature reviewed. The lack of African American students as respondents to the surveys discussed is a gap in the literature reviewed. This study will fill this gap by surveying students from a Historically Black College and University (HBCU) and ensuring that the Afrocentric perspective contributes to the current body of research regarding geriatric social workers and interventions with a diverse aging population.

Ferguson (2015) purported that research to explore predictors of interest in social work with older adults began after leaders in the field began to predict a looming shortage of social workers to work with the aging baby boomers. When surveying participants, the convenience samples utilized did not demonstrate demographic diversity. Ferguson further stated that most respondents across studies were non-Hispanic White females. While the number of women represented in the studies is likely reflective of the social work profession in general, diversity in race, ethnicity, and other categories would enhance the results (Ferguson A., 2015) Lastly; there was a lack of research at HBCU’s concerning gerontology. This study will produce research incorporating HBCU students while comparing the outcomes to a Predominately White Institution (PWI). The findings of this research will fill this gap and add to diversified social science research highlighting HBCU’s and the contributions they add to social science research.
There are many trends associated with the field of geriatric social work. One significant trend, which is the basis of the need for more geriatric social workers, is the increase in the aging population. Many of the professional journal articles reviewed stressed the statistics of the rising population and stressed the importance of social work interest in the field, which leads to the last trend.

Lastly, a common trend of the articles reviewed is the lack of interest in working with the aging, in most professions to include many health-related professions such as physicians, physical therapy, nursing, and social work. The Bureau of Labor Statistics has noted that due to the growth in the older adult population the need for social workers is predicted to increase faster than the average for all occupations. Despite attempts to recruit social workers into the field of gerontology, the older adult population continues to be underserved. The avoidance of aging-related careers may be a result of students’ doubts regarding their ability to effectively intervene with the population (Olson, 2011).
CHAPTER III

METHODOLOGY

The purpose of this study is to determine if aging attitudes, informal knowledge and formal education impact MSW student interest in geriatric social work. The identification of factors that contribute to MSW student interest in geriatric social work will guide education, practice and research efforts that support social work programs and interventions. Chapter III presents the methods and procedures this study utilized to acquire data. The following concepts are described in this chapter: research design, description of the site, sample population, reliability and validity, and instrumentation. This chapter ends with a summary of key points and a transition discussion to the next chapter.

Research Design and Method

Master's level social work students were surveyed to determine what factors influence their interest in geriatric social work. An ex post facto quantitative research design was employed using data to describe factors such as ageist attitudes, informal knowledge, and MSW formal education exposure through the use of surveys. This study was designed to document the characteristics of MSW students and to predict interest based on perceptions. Also, this study explored the relationship between student ageist
attitudes, informal knowledge and MSW formal education exposure offered at a Historically Black College and University (HBCU) and Predominantly White Institution’s (PWI). An HBCU is a college or university that was originally founded to educate students of African-American descent. A PWI is an institution where more than 50% of the enrolled students are of European-American descent.

For this study, social work students enrolled in MSW programs offered at Metropolitan Atlanta universities were invited to participate. The descriptive and exploratory aspect of the research design assisted with the analysis of the student demographic profile. The research design explains the statistical relationship between MSW student ageist attitudes, informal knowledge, MSW education exposure and student interest in geriatric social work.

**Description of the Site**

In Atlanta, four universities are offer MSW programs. This study sought participation from actively enrolled MSW students at three of those universities. The surveys were available online via the use of Survey Monkey and were also available in paper form in the event students did not want to complete the survey electronically. These sites were selected to pool a diverse population which represents the population of the aging.

The first site is a private HBCU located in the heart of Atlanta, Georgia. This institution developed when two historic colleges, in (1865) and (1869), joined together in 1988. In 1947, the institution added the School of Social Work to existing programs.
According to the institution’s website Child and Family and Health/Mental Health are the two specializations offered (School of Social Work Masters Program, 2018).

The second site is the third largest university in the state of Georgia chartered in 1963 by the Board of Regents of the University System of Georgia. The social work program is part of the College of Health and Human Services. This institution is considered a PWI as a majority of the enrolled students are Caucasian; however, there is a mixture of ethnicities and races attending the university. The MSW program began in September of 2007 and offered a full-time program of study with a focus in clinical practice. The program consists of four academic semesters (two years) of 60 credit hours with 48 of these credit hours spent in the classroom and 12 in supervised field practicum sites. Advanced Standing is not an option in the MSW program (Master's of Social Work, 2018).

The third site is an institution with both Athens and Gwinnett campuses. This institution was chartered in 1785 and had 8,758 students enrolled in 2017; 600 of these students were enrolled in the Social Work program. This school is also deemed a PWI as a majority of the student population is Caucasian. The School of Social Work was established in 1964. This institution offers two graduate level concentration areas: Clinical Practice and Community Empowerment and Program Development. Students can either be enrolled full-time or part-time in the MSW program. Several graduate certificates to include a Certificate in Gerontology is available for MSW students (School of Social Work Masters Program, 2018).
Sample and Population

Many MSW students choose social work as a profession because of a strong desire to eradicate social injustice and to provide service to others in need. Some evidence also suggested that students gravitate toward a career in social work as a result of their personal experiences (Thomas J. T., 2016). Few social work students have entered MSW programs with a preference or desire to work with the aging population (Gelman, 2012). The literature concerning the lack of MSW interest in geriatric social work is why MSW students were the target population for this study. While the research shows that social work students are not interested in working with people 65 and older, there is a need for more data related to the factors that influence their interest.

The target population for this study is a diverse pool of students during varying stages of the MSW program. The unit of analysis is MSW students. Purposive sampling was employed to focus on particular characteristics of MSW students that are of interest, and that will allow the researcher to best answer the research questions. Purposive sampling is one of the non-probability samplings that allow the units selected to be investigated based on the judgment of the researcher (Laerd Dissertation, 2019). The goal purposive sample size is a total of 90 participants from metro Atlanta MSW programs. However, the actual sample size was 70 and based upon the voluntary participation of MSW students, who were or were not willing to complete the survey without any incentive.
Instrumentation

The purpose of the survey is to contribute to the limited research on MSW’s interest in working with adults age 65 and older. This study aims to explore the factors influencing MSW student’s interest in geriatric social work. The variables that examined are (1) aging attitudes, (2) informal knowledge and (3) MSW formal education exposure and how they impact student interest to become geriatric social workers.

The study used a cross-sectional survey design using a purposive sample of Master of Social Work (MSW) students. The survey consisted of open and closed-ended questions that measured the perceived aging attitudes, informal knowledge and self-assessed MSW education exposure concerning geriatric social work. An online survey data collection tool called Survey Monkey allowed students to complete the Questionnaires. All responses were confidential. Students were required to read the participant letter embedded in the email which contained a confidentiality statement. By taking the survey, they agreed that their participation was voluntary and that they agreed with the confidentiality statement.

The student survey questionnaire contains statements based on perceptions that attempt to measure the factors influencing MSW interest in geriatric social work. The researcher developed the survey questions after reviewing various instruments provided in published literature, yet no specific predeveloped instrument was used. The survey was divided into five sections: aging attitudes, informal knowledge of the geriatric population, exposure to formal geriatric social work education, interest in geriatric social work and demographic information. Section I of the survey contains ten questions regarding the
independent variable: ageist attitudes and are questions 1-10 of the student survey. The first five were stated negatively, and the last five were affirmed. The ten statements are as follows: Q1. Old age is a depressing time of life, Q2. I see old age mainly as a time of loss, Q3. Older people are mainly waiting to die, Q4. All older people have debilitating physical or mental illnesses, i.e., dementia, Q5. Older people are unable to care for themselves without a caregiver, Q6. Wisdom comes with age, Q7. I value older people, Q8. It is a privilege to grow old, Q9. Older people are wealthy, Q10. Older people should be role models for younger people. The scale was: Strongly Disagree, Disagree, Neutral, Agree and Strongly Agree. The following questions were eliminated from the analysis to increase the reliability of the scale: Q5. Older people are unable to care for themselves without a caregiver, Q6. Wisdom comes with age and Q9. Older people are wealthy. Therefore, there were a total of 7 questions used in the analysis. The score summed all responses with the lowest score totaling 5 and the highest totaling 35 providing the sum for the scale.

Section II of the student survey contains five statements about independent variable: informal knowledge which focuses on geriatric social work information acquired through personal experiences. Questions regarding this independent variable are number’s 11-15 of the student survey. The five statements are Q11. I purposely seek knowledge about the geriatric population through self-driven methods such as reading books, social media, internet searches, etc., Q12. I have acquired knowledge about the geriatric population through employment experiences, Q13. I have acquired knowledge about the geriatric population as a result of being a caregiver for a family or friend age 65
and over, Q14. I have acquired knowledge about the geriatric population through volunteer experiences and Q15. I have acquired knowledge about the geriatric population from close friends or family who are caregivers to an adult age 65 or over. The scale for Q11 was: Never, Rarely, Sometimes, Usually and Always. The score was the sum of all responses with the lowest score totaling 1 and the highest totaling 5 providing the sum for the scale. Q12-Q15 required a yes or no response to the question.

Section III of the survey contains six questions about the independent variable: formal geriatric education exposure from the students MSW program. Questions regarding this independent variable are labeled questions 16-21 on the student survey. The five statements are Q16. In my MSW program, there are faculty/staff members who have an interest in geriatric social work research/service, Q17. I have completed at least one aging course in my MSW program, Q18. My MSW program offers a geriatric social work course, Q19. I was able to experience geriatric social work in my field placement, Q20. My MSW program has a geriatric social work concentration, Q 21. My MSW program organizes lectures/events that supports and promotes a geriatric social work culture. Q16-Q21 requires a yes or no response to the question.

Section IV of the survey asks three questions about the dependent variable: a student's interest in geriatric social work. Questions regarding this dependent variable are labeled questions 22-24 of the student survey. The three questions are Q22. How interested are you in pursuing Geriatric Social Work as a field of study, research or employment venture, Q23. If you are interested in Geriatric Social Work, briefly explain the factors that have contributed to your interest/why you are interested, Q24. If you are
not interested in Geriatric Social Work, why? The scale for Q22 was: Not Interested at All, Slightly Interested, Somewhat Interested, Very Interested, Extremely Interested. The score will be the sum of all responses with the lowest score totaling 1 and the highest totaling 5 providing the sum for the scale. For this study, slightly interested was considered not interested as the definition for slightly means not very much or not considerably. Somewhat interested is considered as neutral and very to extremely interested shows true interest. Lastly, Section V of the student survey contains nine demographic questions about age, ethnicity, nationality, education, marital status, income, MSW concentration, current graduate school and length of the program.

The data collected in this study was used to build a predictive model of the variables that could be associated with MSW students who were interested in working with the older population. Descriptive statistics were used to explain the variable relationships within the sample. SPSS statistical package was the tool used to analyze the data. Each variable was entered into the Ordinal Regression to produce a single model of the data. Ordinal Regression was used to test the relationships between the independent variables and the dependent variable.

Participants voluntarily complete surveys after reviewing and completing informed consents. Ordinal Regression is the statistical analysis used for this study to determine if the three independent variables (aging attitudes, informal knowledge, formal education) predict the continuous dependent variable (interest) in geriatric social work. The advantage of utilizing questionnaires is the efficacy of gathering data from a sample of people to hopefully generalize about the larger population of MSW students.
Reliability and Validity

Cronbach’s alpha, which measures internal consistency, was used to measure the reliability of the scale, aging attitudes. An alpha of .6 or higher was considered acceptable. The aging attitudes scale consisted of 7 items with an acceptable reliability outcome of (a=.683). A group of MSW students associated with the Atlanta area MSW programs were asked to review the instrument to ensure that all concepts are clear and understood as intended for validity. Survey participants were selected from the same population to minimize threats to validity.

Additionally, efforts were made to address concerns related to the research questions in the survey. In terms of external validity, results from this study should not be generalized to populations outside of those MSW students who participated in the study. The researcher managed all data from the survey which resulted in inter-rater reliability.

Data Collection Procedures

The survey was administered via an online survey tool called Survey Monkey, and the results were collected electronically. The survey was also available via paper for those participants who preferred this method; however, all participants chose to participate via Survey Monkey. The survey was emailed to participants by various professors from each site who emailed the survey to MSW students. The researcher also went to the various sites, gathered email addresses from MSW students and emailed the survey link to those who expressed interest in completing the survey. Participants were informed about the purpose of the study, confidentiality, and were able to review the
participation consent statement. By clicking on the link to take the survey, the participants consented to complete the voluntary survey. Each electronic survey assigned participants a personal identification number.

Treatment of the Data

The Statistical Package for the Social Sciences (SPSS) was used to analyze the data. The analysis included four parts: (1) description of the sample – n and % of responses to the demographic questions and (2) Ordinal Regression to determine if the three independent variables (aging attitudes, informal knowledge, formal education) predict the continuous dependent variable (interest) in geriatric social work, (3) analysis of the open-ended questions and (4) analysis of the theoretical perspectives.

Summary

This chapter discussed the ex post facto quantitative research design used to describe factors such as ageist attitudes, informal knowledge, and MSW formal education exposure through the use of surveys. This study sought participation from MSW students currently enrolled at Metropolitan Atlanta universities with MSW programs. The surveys were available online via the use of Survey Monkey. The study used a cross-sectional survey design using a purposive sample of Master of Social Work (MSW) students. The survey consisted of open and closed-ended questions that measured the perceived aging attitudes, informal knowledge and self-assessed MSW education exposure concerning geriatric social work. Reliability, validity, data collection procedures and treatment of the data were all discussed. Chapter IV will present the findings of this study and focus on
the unit of analysis. Chapter V will discuss the implications for social work education, practice, and policy.
CHAPTER IV

PRESENTATION OF FINDINGS

The purpose of this study was to explore the factors influencing Master of Social Work (MSW) student interest in geriatric social work. The research questions explored how aging attitudes, informal knowledge and formal education impact MSW interest in pursuing a career in geriatric social work. These three questions sought to determine if the three independent variables (aging attitudes, informal knowledge, formal education) predict the continuous dependent variable (interest) in geriatric social work among MSW students. An ex post facto quantitative research design was used to describe factors such as ageist attitudes, informal knowledge, and MSW education exposure through the use of surveys.

This chapter addresses the findings of the study in three sections. The first section presents descriptive statistics of the demographic variables. Data analysis results and procedures are presented in the second section. A discussion of how the findings support the research questions and theoretical frameworks is summarized in the third section.

Descriptive Statistics and Demographic Variables

The demographic variables entered into the analysis included: age, ethnicity, nationality, education, marital status, income, MSW concentration, current graduate school and length of the program of the study group (N=70).
The target population for the research was composed of MSW students within metropolitan Atlanta. Three colleges and universities with MSW programs were selected as sites for student participation. Seventy-four students responded. One student responded from a metro Atlanta university site that other than the sites intentionally selected. This response was valid because the site is a metropolitan Atlanta University and the participant was an MSW student. Six respondents decided to skip the demographic section; therefore, their academic institution is unknown. Four of the surveys were incomplete and deleted due to unanswered questions. Each of the four respondents answered the first page of questions and skipped the remaining questions.

The total sample size for the analysis was 70. The survey was emailed to MSW student on multiple occasions over four months; however, student participation was low. Completing the survey was completely voluntary, and no incentives were offered. Providing no incentives may have contributed to the low amount of student participation. This study should not be generalized to other studies due to the limitation of the sample size.

There were ten questions in the fifth section of the survey which consisted of the respondent’s demographic information. The 10 questions were divided into two sections: Personal (#25, #26, #27, #28, #30, #31) and Education (#29, #32, #33, #34).

Age

Of the respondents enrolled in metropolitan Atlanta MSW programs, the highest percentage of respondents are age 20 and 25 (48%), followed by the percentage of
respondents 40 or older (27%), then between 26 and 30 (19%) and respondents age 31
and 35 (5%). The smallest percentage of the respondents are 36-40 (1%).

Ethnicity

Of the respondents enrolled in metropolitan Atlanta MSW programs, the majority
of the respondents are African American (50%), followed by Caucasian (41%) and Asian
(8%). The smallest percentage of respondents are Hispanic or Latino (1%).

Nationality

Of the respondents enrolled in metropolitan Atlanta MSW programs, the majority
of the respondents identified with the United States (92%) and (8%) identified as other:
African (1.6%), Greek (1.6%), Chinese (1.6%), Romanian (1.6%) and Indian (1.6%).

Marital Status

Of the respondents enrolled in metropolitan Atlanta MSW programs, the majority
of the respondents identified as never married (67%), followed by married (30%). The
smallest percentage of the respondents are divorced (3%).

Annual Income

Of the respondents enrolled in metropolitan Atlanta MSW programs, the majority
of the respondent’s annual income was less than $25,000 (56%), followed by $45,000
and higher (17%). A smaller percentage of the respondent’s income was $25,000 and
$34,999 (12%) then $35,000 and $44,999 (8%). Respondents who declined to answer
were (7%). Table 1 displays the descriptive data for the survey sample.
Table 1

*Descriptive Data for the Survey Sample, (N = 70)*

<table>
<thead>
<tr>
<th>Variable</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20-25</td>
<td>31</td>
<td>48%</td>
</tr>
<tr>
<td>26-30</td>
<td>12</td>
<td>19%</td>
</tr>
<tr>
<td>31-35</td>
<td>3</td>
<td>5%</td>
</tr>
<tr>
<td>36-40</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td>40 or older</td>
<td>17</td>
<td>27%</td>
</tr>
<tr>
<td><strong>Ethnicity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>African American</td>
<td>32</td>
<td>50%</td>
</tr>
<tr>
<td>Caucasian</td>
<td>26</td>
<td>41%</td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td>Asian</td>
<td>5</td>
<td>8%</td>
</tr>
<tr>
<td><strong>Nationality</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>United States</td>
<td>59</td>
<td>92%</td>
</tr>
<tr>
<td>Other</td>
<td>5</td>
<td>8%</td>
</tr>
<tr>
<td><strong>Marital Status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>19</td>
<td>30%</td>
</tr>
<tr>
<td>Never married</td>
<td>43</td>
<td>67%</td>
</tr>
<tr>
<td>Divorced</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td><strong>Annual Income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>less than $25,000</td>
<td>36</td>
<td>56%</td>
</tr>
<tr>
<td>$25,000 and $34,999</td>
<td>8</td>
<td>13%</td>
</tr>
<tr>
<td>$35,000 and $44,999</td>
<td>5</td>
<td>8%</td>
</tr>
<tr>
<td>$45,000 and higher</td>
<td>11</td>
<td>17%</td>
</tr>
<tr>
<td>Declined to answer</td>
<td>4</td>
<td>6%</td>
</tr>
</tbody>
</table>
Of the respondents enrolled in metropolitan Atlanta MSW programs, the majority of the respondents are graduating in 2019 (50%), followed by 1st-year students (41%), then 2nd-year students (6%). The smallest percentage of respondents are 3rd year MSW students (3%). Figure 2 displays the MSW program level characteristics.

Figure 2. MSW program level characteristics, n=70.
Graduate School

Of the respondents enrolled in metropolitan Atlanta MSW programs, the majority of the respondent’s attended a Predominately White Institution (PWI) with a total of (67%). A smaller percentage attended a Historically Black College and University (HBCU) representing a total of (33%). Figure 3 illustrates the percentage of respondents per graduate school. School “A” represents the HBCU and “B, C, and D” represents the PWI graduate schools.

Figure 3. Graduate school characteristics, n=70.
Length of Program

Of the respondents enrolled in metropolitan Atlanta MSW programs, the majority of the respondents are enrolled in a 2-year program (77%), followed by a 3-year program (17%). A smaller percentage was enrolled in an advanced standing MSW program (6%). Figure 4 displays the length of program characteristics.

![Figure 4](image)

Figure 4. Length of program characteristics, n=70.

Data Analysis and Procedures

RQ 1: Does the interest in working with older adults vary significantly based on MSW student aging attitudes?
In response to this research question, a regression test (Ordinal Regression) was performed to predict the belief that aging attitudes had a statistically significant effect on “interest” in geriatric social work among MSW students. Ordinal Regression was selected as the level of statistical analysis because the dependent variable data was collected at the ordinal level and the independent variable is at the ordinal level. As mentioned in other chapters, the variable aging attitudes were defined as the implicit bias or stereotypes about the aging population that affects our understanding, actions, and decisions unconsciously.

RQ2: Does the interest in working with older adults vary significantly based on MSW student informal knowledge about the geriatric population?

In response to this research question, a regression test (Ordinal Regression) was performed to predict the belief that informal knowledge had a statistically significant effect on “interest” in geriatric social work among MSW students. Ordinal Regression was selected as the level of statistical analysis because the dependent variable data was collected at the ordinal level and the independent variable is ordinal as well. As mentioned in other chapters, informal knowledge refers to information acquired through personal experience other than formal education.

RQ3: Does the interest in working with older adults vary significantly based on MSW student exposure to formal geriatric social work education?

In response to this research question, a regression test (Ordinal Regression) was performed to predict the belief that informal knowledge had a statistically significant
effect on “interest” in geriatric social work among MSW students. Ordinal Regression was selected as the level of statistical analysis because the dependent variable data was collected at the ordinal level and the independent variable is dichotomous. As mentioned in other chapters, formal education is gerontology focused courses and experiential learning opportunities which provide students with aging and social work concepts that are useful in one’s work with geriatric clients.

There were no missing values; all 70 cases were valid. The model of fit showed a statistically significant result of (P<0.004). This result means the model gives better predictions than if the researcher guessed based on the marginal probabilities for the outcome categories. The analysis concluded that there was a statistically significant outcome in regards to the variables aging attitudes (p<.05) and education exposure (p<0.05) indicating that the null hypothesis for both variables was rejected. Aging attitudes were stated both positively and negatively. The estimated coefficient for aging attitudes is (-.267) which signifies that the more aging attitudes decrease, the more likely there is MSW interest in working with older adults. Participants indicated that they had less exposure to formal education regarding geriatric social work.

The estimated coefficient for education exposure is (-.467) indicating the more exposure MSW students have to formal education, the more interested they are in working with older adults. Both aging attitudes and education exposure can indeed impact MSW interest in geriatric social work. Informal knowledge did not produce a statistically significant result at (p=.194); thus, the null hypothesis can be accepted as this variable does not impact MSW interest in geriatric social work. The estimated coefficient
for informal knowledge is (.268). Table 2 displays a summary of the regression analysis results.

Table 2

<table>
<thead>
<tr>
<th>Aging Attitudes</th>
<th>Informal Knowledge</th>
<th>Formal Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interest</td>
<td>P Value (.009)</td>
<td>P Value (.194)</td>
</tr>
<tr>
<td>Estimate</td>
<td>(-.267)</td>
<td>Estimate (.268)</td>
</tr>
</tbody>
</table>

Survey question 22 asked respondents, *How interested are you in pursuing Geriatric Social Work as a field of study, research or employment venture?* The scale for Q22 was: Not Interested at All, Slightly Interested, Somewhat Interested, Very Interested, Extremely Interested. The scale was recoded to produce a frequency analysis of respondents who are interested vs. those who are not interested in geriatric social work. The results show that 42.9% of the respondents are interested and 57.1% are not interested in geriatric social work.

A crosstab analysis was conducted to explore the age of the study participants and their interest in geriatric social work. Only 64 of the 70 participants (91.4%) answered the “age” question; however, all 70 participants answered the “interest” question. The results show that there were 31 participants in the 20-25 age group which equals 48%. Within this age group, 12 participants (38.7%) were interested, and 19 participants (61.3%) were
not interested in working with the geriatric population. The age group was important to highlight in this study as the age of the participant may have an impact on interest in working with older adults. Figure 5 displays participant interest in geriatric social work and the age group of participants.

![Bar Chart]

Figure 5. Interest in geriatric social work and age group of participants.

Data from the open-ended survey questions were analyzed to identify emerging themes related to MSW interest in geriatric social work. There were 29 responses from
those expressing the reasons why they were interested. There were 24 responses from those who are not interested in geriatric social work. Analysis of the open-ended survey questions from the interested research participants was separated into three prominent themes: **positive aging attitudes, personal connection, and formal education and employment.**

Participant responses regarding positive aging attitudes were:

- I feel as though as we get older, we should still be treated equally and not be discriminated against because of our age.
- I believe older people have a lot of information and knowledge to offer, mainly through their experiences and not just what they’ve heard.
- I think it is a population that is greatly neglected within the social work community. I believe that older individuals need assistance and support just as much as any other vulnerable group of people.
- Someone needs to do the work and provide resources to the elderly population.
- I believe we have a responsibility always to honor and cherish our elderly; therefore, working in geriatrics would be a privilege.
- It seems like meaningful and fulfilling work.
- Not only is this a growing group of people who need and deserve appropriate care and dignity, but I also enjoy the relationships.
- It is a population that is overlooked.
Because people are living longer than before and they need services. Also, one day I will be at the same stage, so we have to care.

Participants responses related to personal connection included:

• My grandparents have always been a part of my life, and I have seen first-hand some of the issues they face. I want to dive more into aging and find ways to assist/help those who are overlooked.

• I am 59, and I'm a caregiver for my 70-year-old husband and my 76-year-old mother. I want to learn how to provide better care for them and to learn what my care options will be when I'm in my 70's and be a support for other senior citizens as a social worker.

• I am interested in Geriatric Social Work because I am a caregiver for two seniors and I am almost a senior. I want to learn about all the resources available and what help will be available for me as I age. The Geriatric population is growing and living longer than ever!

• I grew up learning to respect my elders, and it's my norm. I take care of my grandmother, and I worked at a senior center.

• Experience in hospice, aging parents of my own and personal experience with the elderly have shaped my interest.

• I will be in their place in the future, so I want to be a role model for those who plan to work with this population.

Lastly, participants' responses related to formal education and employment state the following:
• I love the Geriatric population. I interned for a year with a hospice organization in my Undergraduate program, which helped my love for the older population grow! I am also a Young Advocate for the Alzheimer's Association and have been to DC to speak with my representatives on the matter. I am currently interning at the VA which is my desired population. I am lucky that most of my Veterans are 65 and older.

• I work in hospice now in my field placement. I know that there is a HUGE need for good social workers for this niche. I love it, but I’m still just getting into social work as a career, so I am trying to explore other options as well.

• My field placement is in Hospice.

• I am interested because I have a desire to support others through end of life issues, grief and loss.

• I want to work in a hospice agency. Not all patients in hospice agencies are older; however, the majority are older.

• Well, I am interested in studying the different stages of growing older.

• I am slightly interested in having a base foundation on geriatric studies.

• I'm interested in being a grief counselor and working the geriatric population would be an interesting aspect of that.

• Knowing that the geriatric population needs the resources that are provided by social workers, it is essential that more social workers become involved in providing the services required. As a social worker, I have worked in an
environment that brought awareness to the need to connect with geriatric patients and to help them live healthy and happy lives.

- Older adults are a booming population based on current trends, and it would be beneficial to know how to work with this population as they will start to have a large demand for geriatric SWs in the future.

- I would like to know more about the mental aspects of the aging process.

- I took a geriatrics course in undergrad, and I also had a mentor/professor who studied health disparities for older Black Americans. I think aging people are often forgotten and people think geriatric social work is limited.

- My job, I currently work with older adults.

Analysis of the open-ended survey questions from the participants who were not interested was separated into four prominent themes: negative aging attitudes, interest in other social populations, personal connection, and personal preference.

Participant responses regarding negative aging attitudes were:

- I suppose I do not feel a connection to the geriatric community, and I know that I hold a lot of biases as it pertains to the psychosocial experiences of the elderly.

- I think there is intimidation that stems from feeling incompetent working with older populations.

- I do not want to become involved with government regulations and requirements related to reimbursement. I want to work with people, not paperwork.
It’s too heartbreaking to watch as some of them fade away health wise.

Death and dying is not my forte.

Participant responses regarding lack of interest due in interest in other social populations were:

- My primary focus is on children and families.
- I prefer to work with children.
- My interests involve children through middle adulthood.
- I am interested in the young adult population. I have a soft spot for the geriatric population but not to work with daily.
- I am more interested in other fields of social work (such as children, medical, school, etc.) Though I am not interested, I wouldn't mind working with them (for example having geriatric patients as a medical social worker).
- My heart belongs to teenagers in foster care.
- I am more interested in focusing on children.
- I believe the mental health concentration is important to me at this time.
- I am interested in the younger population.
- I am more interested in the population involving children and adolescents. I have nothing against Geriatric Social Work.
- I'm not interested in Geriatric Social Work as a field of practice because I'm more interested in working with children and family and maybe mental health.
- I have an interest in working with children.
- I like working with children.
• I am interested in children and families as my target population. In undergrad, I received certifications in children advocacy.

The participant’s response regarding personal connection was:

• I would find it difficult to work with the Geriatric population. My unwillingness to work with this population stems from how close I am with my grandparents and how they raised me.

Participant responses regarding personal preference were:

• Just not drawn to that population.
• I don’t have a desire to work with older people.
• Although I like being with the elderly, it just isn't something I want to do as a career.
• Not knowledgeable enough of the population.

**Analysis of the Afrocentric Perspective (Strengths Perspective)**

The Afrocentric Perspective and the Social Cognitive Career Theory served as the theoretical framework for this study to describe human social learning processes which apply to the ways people shape interest. The presence of the Afrocentric Perspective can impact geriatric social work interest among MSW students by (a) reframing negative aging attitudes and (b) promoting the positive aging attitudes as reflected in the strength’s perspective concept of Wright, White, Jones et al., (2018) 10 Concepts of Afrocentric Perspective.
Aging Attitudes

Negative and positive aging attitudes were measured by survey items 1-10. The scale was: Strongly Disagree, Disagree, Neutral, Agree and Strongly Agree. Q1 was stated as Old age is a depressing time of life: 53% of the respondents disagreed, 20% were neutral, and 27% agreed with this statement. Q2. I see old age mainly as a time of loss: 76% of the respondents disagreed, 13% were neutral and 11% agreed with this statement. Q3. Older people are mainly waiting to die: 93% of the respondents disagreed, 4% were neutral, and 3% agreed with this statement. Q4. All older people have debilitating physical or mental illnesses, i.e., dementia: 87% of the respondents disagreed, 9% were neutral, and 4% agreed with this statement. Q5. Older people are unable to care for themselves without a caregiver: 86% of the respondents disagreed, 9% were neutral, and 6% agreed with this statement. Q5. Older people are unable to care for themselves without a caregiver was eliminated from the analysis to increase the reliability of the scale. Overall, MSW students disagreed with the negative aging attitudes related to geriatric people indicating less bias against the population.

Aging attitudes were stated positively in questions 6-10. The scale was: Strongly Disagree, Disagree, Neutral, Agree and Strongly Agree. Q6 was stated as Wisdom comes with age: 7% of the respondents disagreed, 17% were neutral, and 76% agreed with this statement., Q7. I value older people: 3% were neutral, and 97% agreed with this statement. Q8. It is a privilege to grow old: 6% were neutral, and 94% agreed with this statement. Q9. Older people are wealthy: 47% disagreed with this statement, 43% were
neutral, and 10% agreed with this statement. Q10. Older people should be role models for younger people: 7% of respondents disagreed, 23% were neutral, and 70% agreed with this statement. Q6. Wisdom comes with age and Q9. Older people are wealthy were eliminated from the analysis to increase the reliability of the scale. Overall, MSW students agreed with the positive aging attitudes related to geriatric people indicating less bias against the population. MSW students favorably perceive the positive group characteristics of the geriatric population as related to the Afrocentric Perspective’s conceptualization of the strength’s perspective.

**Analysis of the Social Cognitive Career Theory**

Social Cognitive Career Theory (SCCT) focuses on the formation and elaboration of educational and occupational pursuits. The presence of the SCCT impacts geriatric social work interest among MSW students through informal knowledge and formal education. Survey items 11-15 measured informal knowledge and survey items 12-21 measured formal education.

**Informal Knowledge**

Informal knowledge refers to information acquired through personal experience other than formal education. The five statements are Q11. I purposely seek knowledge about the geriatric population through self-driven methods such as reading books, social media, internet searches, etc. The scale for Q11 was: Never, Rarely, Sometimes, Usually and Always. The respondents who never seek knowledge through self-driven methods make up 11%, rarely make up 31%, sometimes at 37%, usually at 17% and 3% of the
respondents state they always use self-driven methods to seek knowledge about the geriatric population.

Questions 12-15 were answered either yes or no. Q12 stated I have acquired knowledge about the geriatric population through employment experiences: respondent who selected yes were 60% and no were 40%. Q13. I have acquired knowledge about the geriatric population as a result of being a caregiver for a family or friend age 65 and over: 49% selected yes and 51% selected no. Q14. I have acquired knowledge about the geriatric population through volunteer experiences: 56% said yes, and 44% selected no.

Lastly, Q15. I have acquired knowledge about the geriatric population from close friends or family who are caregivers to an adult age 65 or over: 74% selected yes and 26% selected no. Results from the informal knowledge portion of the survey show that (88%) of participants seek to acquire knowledge about the geriatric population through self-driven methods such as reading books, social media or internet searches at least some of the time. Participants generally acquire knowledge regarding the geriatric population through informal means such as employment experiences, being a caregiver of a geriatric family member or friend, volunteer experiences or from the experiences of close friends and families.

**Formal Education**

Formal geriatric social work education refers to geriatric course work or field experience in the respondent’s MSW program. Questions are labeled 16-21 on the survey instrument. Q16-Q21 requires a yes or no response to the question. The five statements are Q16. In my MSW program, there are faculty/staff members who have an interest in
geriatric social work research/service: 60% responded yes, and 40% responded no to this statement. Q17. I have completed at least one aging course in my MSW program: 27% responded yes, and 73% responded no to this statement. Q18. My MSW program offers a geriatric social work course: 41% answered yes, and 59% answered no to this statement. Q19. I was able to experience geriatric social work in my field placement: 27% responded yes, and 73% responded no to this statement. Q20. My MSW program has a geriatric social work concentration: 6% responded yes, and 94% responded no to this statement. Q 21. Lastly, My MSW program organizes lectures/events that supports and promotes a geriatric social work culture: 30% responded yes, and 70% responded no to this statement.

The data suggest that MSW faculty and staff display an interest in geriatric social work yet MSW programs at the sites surveyed do not offer a geriatric social work concentration. MSW students are not exposed to geriatric social work through a structured curriculum or diverse aging course offerings, and therefore geriatric courses are not a priority for MSW students. Students are not acquiring geriatric social work knowledge through field placement or receiving exposure to the field through lectures or events at the levels needed to generate interest in the field. Table 3 displays an analysis of the theoretical perspective results. Table 4 displays an analysis of the social cognitive career theory results.
Table 3

Analysis of the Afrocentric Perspective (Strengths Perspective) Results

<table>
<thead>
<tr>
<th>Question</th>
<th>Disagreed</th>
<th>Neutral</th>
<th>Agreed</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Negative Aging Attitudes</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q1. Old age is a depressing time of life:</td>
<td>53%</td>
<td>20%</td>
<td>27%</td>
</tr>
<tr>
<td>Q2. I see old age mainly as a time of loss:</td>
<td>76%</td>
<td>13%</td>
<td>11%</td>
</tr>
<tr>
<td>Q3. Older people are mainly waiting to die:</td>
<td>93%</td>
<td>4%</td>
<td>3%</td>
</tr>
<tr>
<td>Q4. All older people have debilitating physical or mental illnesses i.e., dementia:</td>
<td>87%</td>
<td>9%</td>
<td>4%</td>
</tr>
<tr>
<td>Q5. Older people are unable to care for themselves without a caregiver:</td>
<td>86%</td>
<td>9%</td>
<td>6%</td>
</tr>
<tr>
<td><strong>Positive Aging Attitudes</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q6. Wisdom comes with age:</td>
<td>7%</td>
<td>17%</td>
<td>76%</td>
</tr>
<tr>
<td>Q7. I value older people:</td>
<td>0%</td>
<td>3%</td>
<td>97%</td>
</tr>
<tr>
<td>Q8. It is a privilege to grow old:</td>
<td>0%</td>
<td>6%</td>
<td>94%</td>
</tr>
<tr>
<td>Q9. Older people are wealthy:</td>
<td>47%</td>
<td>43%</td>
<td>10%</td>
</tr>
<tr>
<td>Q10. Older people should be role models for younger people:</td>
<td>7%</td>
<td>23%</td>
<td>70%</td>
</tr>
</tbody>
</table>
### Table 4

**Analysis of the Social Cognitive Career Theory Results**

<table>
<thead>
<tr>
<th>Question</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Informal Knowledge</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q11. I purposely seek knowledge about the geriatric population through self-driven methods such as reading books, social media, internet searches, etc.</td>
<td>11%</td>
<td>31%</td>
<td>37%</td>
<td>17%</td>
<td>3%</td>
</tr>
<tr>
<td>Q12. I have acquired knowledge about the geriatric population through employment experiences:</td>
<td>60%</td>
<td></td>
<td></td>
<td></td>
<td>40%</td>
</tr>
<tr>
<td>Q13. I have acquired knowledge about the geriatric population as a result of being a caregiver for a family or friend age 65 and over:</td>
<td>49%</td>
<td></td>
<td></td>
<td></td>
<td>51%</td>
</tr>
<tr>
<td>Q14. I have acquired knowledge about the geriatric population through volunteer experiences:</td>
<td>56%</td>
<td></td>
<td></td>
<td></td>
<td>44%</td>
</tr>
<tr>
<td>Q15. I have acquired knowledge about the geriatric population from close friends or family who are caregivers to an adult age 65 or over:</td>
<td>74%</td>
<td></td>
<td></td>
<td></td>
<td>26%</td>
</tr>
<tr>
<td><strong>Formal Education</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q16. In my MSW program, there are faculty/staff members who have an interest in geriatric social work research/service:</td>
<td>60%</td>
<td></td>
<td></td>
<td></td>
<td>40%</td>
</tr>
<tr>
<td>Q17. I have completed at least one aging course in my MSW program:</td>
<td>27%</td>
<td></td>
<td></td>
<td></td>
<td>73%</td>
</tr>
<tr>
<td>Q18. My MSW program offers a geriatric social work course:</td>
<td>41%</td>
<td></td>
<td></td>
<td></td>
<td>59%</td>
</tr>
<tr>
<td>Q19. I was able to experience geriatric social work in my field placement:</td>
<td>27%</td>
<td></td>
<td></td>
<td></td>
<td>73%</td>
</tr>
<tr>
<td>Q20. My MSW program has a geriatric social work concentration:</td>
<td>6%</td>
<td></td>
<td></td>
<td></td>
<td>94%</td>
</tr>
<tr>
<td>Q21. My MSW program organizes lectures/events that supports and promotes a geriatric social work culture:</td>
<td>30%</td>
<td></td>
<td></td>
<td></td>
<td>70%</td>
</tr>
</tbody>
</table>
Chapter IV presented data from the 33-item survey. Several tables and figures were used to present descriptive statistics of demographic data. Research question 1, regarding the statistical significance between the variables interest in geriatric social work and aging attitudes, was confirmed by statistical analysis using ordinal regression. Research question 2, regarding the statistical significance between the variables interest in geriatric social work and informal knowledge, was analyzed using ordinal regression as the method of statistical analysis. The null hypothesis was accepted. Research question 3, regarding the statistical significance between the variables interest in geriatric social work and formal education, was confirmed by statistical analysis using ordinal regression. A cross tab analysis was performed to analyze participant interest based on their age group. The open-ended questions regarding geriatric social work interest resulted in 53 statement items provided by MSW students. Constructs from the theoretical frameworks were measured by frequency analysis of survey questions about variables aging attitudes, informal knowledge, and formal education. Chapter V will discuss the analysis of existing literature and theoretical frameworks, implications of the analysis and recommendations for education, practice, policymakers, and future research.
This research study was designed to answer three questions concerning geriatric social work interest among MSW students in Metropolitan Atlanta. Presented in this chapter is the analysis of the findings as it pertains to the existing literature and theoretical frameworks. Additionally, this chapter interprets the results and discusses the implications of the analysis. Recommendations for MSW education, practice and policymakers are proposed. Lastly, this chapter provides recommendations for future research.

Findings from the literature illustrate several significant points regarding geriatric social work. By 2060, Americans ages 65 and older are estimated to more than double from today's number of 46 million to over 98 million, and the total population of those age 65-and-older will increase to nearly 24 percent from today's 15 percent (Mathers, 2018). There is a critical need for competent professionals trained to work with older adults as evidenced by demographic and labor force trends (Bergman & Erickson, 2014). However, research suggested that only 3% of MSW students typically select an aging or geriatric social work concentration (Dakin, Quijano, Bishop, & Sheafor, 2015). Ferguson (2012) purported that ageism may be a contributing factor to the low amount of interest among social workers to practice in geriatric settings. Lastly, one of the ongoing issues
related to enhanced education for social workers in aging is whether the infusion of content or specialization is optimal (Damron-Rodriguez, Goodman, Ranney, Min, & Takahashi, 2013). Research has indicated that not enough programs at the MSW level provide significant training in gerontological social work (Gelman, 2012).

The purpose of this ex post facto study was to explore the factors influencing Master of Social Work (MSW) student interest in geriatric social work. Social Cognitive Career Theory and the Afrocentric Perspective guided the research questions and provided a context for understanding how human social learning processes such as aging attitudes and formal education shape interest. The study focused on the social learning processes of current MSW students and how these factors impacted their interest in geriatric social work. The topic of MSW interest in geriatric social work broadens the discussion to include systemic issues, policy, and leadership.

The three research questions for this study were: Does the interest in working with older adults vary significantly based on MSW student aging attitudes? Does the interest in working with older adults vary significantly based on MSW student informal knowledge about the geriatric population? Does the interest in working with older adults vary significantly based on MSW student exposure to formal geriatric social work education? An ex post facto quantitative research design was employed using data to describe factors such as ageist attitudes, informal knowledge, and MSW education exposure through the use of surveys. This study was designed to document the characteristics of MSW students and to predict interest based on perceptions.
Findings and Interpretation

Findings from the first research question (Does the interest in working with older adults vary significantly based on MSW student aging attitudes?) indicated a statistically significant result (P<0.05) between geriatric social work interest and aging attitudes. The second research question (Does the interest in working with older adults vary significantly based on MSW student informal knowledge about the geriatric population?) did not produce a statistically significant result at (P=.194) thus the null hypothesis can be accepted as this variable does not impact MSW interest in geriatric social work. The third research question (Does the interest in working with older adults vary significantly based on MSW student exposure to formal geriatric social work education?) indicated a statistical significant result between interest and education exposure at (P<0.05). In conclusion, aging attitudes and education exposure does indeed impact MSW interest in geriatric social work. Similar literature from Ferguson (2012) purported that ageist attitudes and biases are a contributing factor to low interest in geriatric practice among social workers.

Data from a crosstab analysis was gathered to explore the age of the participants and their interest in geriatric social work. The results showed the 20-25-year-old age group equaled 48% of the total population. Within this age group, 12 participants (38.7%) were interested, and 19 participants (61.3%) were not interested in working with the geriatric population.

Data from the open-ended survey questions were analyzed to identify emerging themes related to MSW interest in geriatric social work. There were 29 responses from
those expressing the reasons why they were interested in geriatric social work and 24 responses from those who are not interested. Analysis of the open-ended survey questions from the interested research participants was separated into three prominent themes: positive aging attitudes, personal connection, and formal education and employment. Analysis of the open-ended survey questions from the participants who were not interested was separated into four prominent themes: negative aging attitudes, interest in another social population, personal connection and personal preference. Respondents who were not interested expressed that they were more interested in child welfare, mental health and working with a younger adult population. These responses were similar to research by Velez Ortiz et al. (2012) which had found that gerontological social work ranks fifth after other fields such as mental health, health, family services, and child welfare.

Research participants were asked (How interested are you in pursuing Geriatric Social Work as a field of study, research or employment venture?). This study shows that 43% of the respondents are interested and 57% are not interested in geriatric social work. These results continue to illustrate that overall MSW students are not interested in the field of geriatric social work and are consistent with the literature that purported only 3% of MSW students typically select an aging or geriatric social work concentration (Dakin, Quijano, Bishop, & Sheafor, 2015). While the percentage of interest in this study is higher than 3%, 43% is not enough interest to meet the demands of the growing geriatric population.
The Afrocentric Perspective and the Social Cognitive Career Theory served as the theoretical framework for this study to describe human social learning processes which apply to how people shape interest. The presence of the Afrocentric Perspective impact geriatric social work interest among MSW students by (a) reframing negative aging attitudes and (b) promoting the positive aging attitudes as reflected in the strength’s perspective concept of Wright, White, Jones et al., (2018) 10 Concepts of Afrocentric Perspective. Overall, MSW students disagreed with the negative aging attitudes related to geriatric people indicating less bias against the population. Additionally, MSW students agreed with the positive aging attitudes associated with the geriatric population reporting less bias against the population. MSW students favorably perceive the positive group characteristics of the geriatric population as related to the Afrocentric Perspectives conceptualization of strengths perspective.

Social Cognitive Career Theory (SCCT) focuses on the formation of educational and occupational pursuits. SCCT asserts that people learn and pursue careers as a result of external influences and observing others. The presence of the SCCT impacts geriatric social work interest among MSW students through informal knowledge and formal education. The data suggest that MSW faculty and staff are interested in geriatric social work. However, MSW programs in Metropolitan Atlanta do not offer geriatric social work concentrations, and minimal students are taking geriatric courses. MSW students are not receiving information about geriatric social work through a structured curriculum even though their MSW programs are offering courses. Students are not in field placements working with the geriatric population acquiring the knowledge and
experiential learning needed to serve this population. Nor are they receiving adequate exposure to the field through lectures or events at the levels needed to generate interest in the field.

**Conceptual Model**

The conceptual model (Figure 1) depicts how geriatric social work interest and the theoretical frameworks SCCT and Afrocentric Perspective connect. It also explains how geriatric social work interest is impacted by aging attitudes, informal knowledge, and formal education. The SCCT and the Afrocentric Perspective are theoretical frameworks used to describe human social learning processes which apply to how people acquire knowledge, skills and shape interest. People acquire knowledge, skills and shape interest through influential aging attitudes as well as informal knowledge means such as employment and volunteering. Knowledge, skills and the shaping of interest is also acquired through formal education such as curriculum and experiential learning opportunities. The next section in this chapter addresses the issues presented in terms of implications for education, practice, and policy. The chapter ends with a discussion of recommendations for future research and conclusion.

**Results of the Analysis**

**Implications for Social Work Education**

Findings from this study suggest MSW social work educators and programs may face challenges understanding the importance of incorporating geriatric social work into the formal education environment. MSW educators and programs are important tools for
introducing students to the field and ensuring they have the knowledge and skills needed
to meet the needs of those 65 and older. The research indicates that exposure to geriatric
social work curriculum and field education has a direct impact on student interest in the
field. However, students are not receiving adequate exposure to gerontology content in
their MSW programs and are choosing other social work populations as their education
and career focus.

Findings from this study suggest schools of social work are not integrating
gerontology content in their curricula and MSW program culture in ways that generate
interest in the field. They are not offering: geriatric social work concentrations or
specializations, adequate educational content specific to aging, inviting guest speakers
nor are they encouraging field experiences with older adults on a large enough scale to
generate interest. Therefore, more educational opportunities through curricula and
experiential learning opportunities are needed to generate interest and prepare social
work students for working with the growing diverse aging population. Also, institutions
of education should provide lectures and guest speakers who have experience in the field
who can present on various topics. Students should have the opportunity to interact and
engage with lecturers who can communicate with students to spark interest in topics
regarding aging.

Empirical literature shows that the elderly population will become more diverse.
Utilizing the Afrocentric Perspective as the basis for MSW geriatric education would
provide students with concepts needed to address the issues of diverse aging groups to
include strengths driven services. Curricula and MSW program cultures infused with
Wright et al. (2018) 10 Concepts of Afrocentric Perspective would provide students with valuable skills and knowledge based in: humanistic values, autonomy, strengths perspective, matrix roles, spiritual balance, collective view of self, universalistic and particularistic outlook, significance of self-knowledge and personal experience, validation of circular and linear logic, and intuitive ideologies.

The Council on Social Work Education (CSWE) strives to prepare students and professionals for working with the aging population. Schools of social work should partner with CSWE and utilize their resources to enhance their curriculum. The curriculum should include geriatric social work content and promote innovative evidenced-based interventions. CSWE’s National Center for Gerontological Social Work Education offers faculty development opportunities and curriculum resources to promote gerontology competence. Faculty can use the curriculum mapping process to promote gerontological social work competency achievement among their students while meeting the Educational Policy and Accreditation Standards requirements (Thompkins, Swanson-Ernst, Ihara, & Clark, 2011).

**Implications for Practice**

The barrier to hiring social workers in agencies serving older adults is the severe lack of diverse and competent social workers with a specialization in gerontology. Research from Gelman (2012) purported that the barrier to hiring clinicians in agencies serving older adults is the severe lack of qualified applicants along with insufficient numbers of ethnically diverse applicants (Gelman, 2012). The skills required to be a proficient geriatric social worker include aging specific assessment, case management,
crisis intervention, therapeutic interventions such as reminiscence therapy and understanding medical terminology. Also, it is essential for social workers to understand: how illnesses impact the quality of life, end of life and retirement planning, advocacy and extensive knowledge surrounding policies such as Medicare, Medicaid, and Social Security and the programs available for aging citizens.

Organizations that employ geriatric social workers can support the development of the proficient practice of their employees by providing opportunities and benefits that encourage continuing training and education. Allowing paid days off to attend continuing education and providing stipends to attend training increases the opportunity for clinicians to stay current with geriatric social work trends and developments. Providing training in-house or inviting a geriatric specialist to present in-house can contribute to the proficiency of geriatric clinicians. Encouraging NABSW, NASW and CSWE professional memberships or stipends to pay for such memberships contribute towards enhancing competence and interest in geriatric social work. Such memberships stress the importance of professionalism and collaboration within the social work profession, allowing professionals the opportunity for professional development.

**Implications for Policy**

The Older Americans Act of 1965 (Pub. L. 89-73, 79 Stat. 218, July 14, 1965) is a federal initiative aimed at providing services necessary to help older adults stay as independent as possible in their homes and communities by providing in-home assistance, respite for caregivers, home-delivered meals, preventive health services, and legal services for older adults (Thomas & Mor, 2013). OAA is always under fire by the
government as it often aims to deplete or do away with the budget. Due to the mandate within the policy being at risk for losing funding, services that allow older adults to be safe and with maximized quality of life are at risk. Advocacy for the longevity of the OAA is necessary to prevent a decrease in services. Also, the decreased funding impacts job opportunities in the field of geriatric social work. A lack of job opportunities could impact a professional’s decision to select geriatric social work as a career. This policy should be utilized to entice interest in the field of geriatric social work, allowing for higher pay and assistance with education stipends.

CSWE advocates for issues important to social work education by interacting with the U.S. Congress, the various agencies within the federal government, and other organizations throughout the social work and higher education communities (Policy Agenda, 2019). CSWE’s Gero-Ed Center advances strategic national social work leadership to bridge practice, education and to provide social workers with geriatric competencies. Through CSWE advocacy efforts, social work leaders could propose policy mandates to incorporate gerontology specializations and concentrations into MSW programs. This effort will help ensure that social work professionals are prepared to handle the needs of the largest growing population of older people age 65 and older.

**Limitations of the Study**

One of the significant limitations concerns the Aging Attitudes Scale within the survey instrument used to test respondents’ perceptions of aging attitudes. The reliability of this instrument coefficient was .683 while the goal was .7. Although a .5 and below is deemed unacceptable, and .683 is acceptable, a strong coefficient is desirable indicating a
more reliable scale. However, there are no standardized Aging Attitude Scales that fit this research study. Therefore, the scale was specifically designed for this study.

Second, there were only 70 responses to the survey. One of the survey sites had a saturated amount of responses. Therefore, this study cannot be generalized to other studies due to the limitation of the sample size.

**Recommendations for Future Research**

There is minimal data regarding the use of the Afrocentric Perspective as the driving practice model for geriatric social work service delivery. Further research regarding the Afrocentric Perspective as the foundation of geriatric social work could produce data for practice models, evidence-based interventions and geriatric social work curricula. Also, researching intervention outcomes as a result of clinicians utilizing the Afrocentric Perspective as a practice model with the diverse geriatric population could explore if client wellbeing is impacted.

The results of this study showed that aging attitudes and formal education impact MSW student interest in geriatric social work. More research regarding other factors influencing interest and how to increase interest is greatly needed to meet the demands of this growing population. Creating methods to encourage social work clinicians to choose geriatric social work is dependent on the data collected from research focused on preparing a diverse pool of qualified and proficient geriatric clinicians. More research to support the need for MSW programs to proactively increase their geriatric content and form a supportive geriatric culture is the change students need to experience today.
APPENDIX A

QUESTIONNAIRE

A Study of Factors that Influence Interest in Geriatric Social Work Among Master of Social Work Students in Metropolitan Atlanta
Dacia D. Davis, LMSW ASW-G-School of Social Work Ph.D. Program Clark Atlanta University

Section I: Aging Attitudes: Aging attitudes refers to fixed ways of thinking, feeling or stereotypes about those age 65 and older that affect our understanding, actions and decisions in an unconscious manner.

Instruction: Place an (X) in the box that best represents your level of agreement. Please select only one response for each statement below.

<table>
<thead>
<tr>
<th></th>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>1. Old age is a depressing time of life.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2. I see old age mainly as a time of loss.</td>
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<td>3. Older people are mainly waiting to die.</td>
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<td>4. All older people have debilitating physical or mental illnesses. i.e., dementia</td>
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<tr>
<td>5. Older people are unable to care for themselves without a caregiver.</td>
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<tr>
<td>6. Wisdom comes with age.</td>
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<tr>
<td>7. I value older people.</td>
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<td>8. It is a privilege to grow old.</td>
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<td>9. Older people are wealthy.</td>
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<tr>
<td>10. Older people should be role models for younger people.</td>
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</tbody>
</table>
Section II: Informal Knowledge of Geriatric Population – Informal knowledge refers to information acquired through personal experience other than formal education.

Instruction: Place an (X) in the box that best represents your response. Please select only one response for each statement below.

<table>
<thead>
<tr>
<th>Question</th>
<th>1. Never</th>
<th>2. Rarely</th>
<th>3. Sometimes</th>
<th>4. Often</th>
<th>5. All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>11. I seek knowledge about caring for the geriatric population by self-driven methods such as reading books, social media, internet searches, etc.</td>
<td></td>
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</tr>
<tr>
<td>12. I have acquired knowledge about caring for the geriatric population through employment experiences.</td>
<td>1 Yes</td>
<td></td>
<td></td>
<td></td>
<td>2 No</td>
</tr>
<tr>
<td>13. I have acquired knowledge about caring for the geriatric population as a result of being a caregiver for a family or friend age 65 and over.</td>
<td></td>
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<tr>
<td>14. I have acquired knowledge about caring for the geriatric population through volunteer experiences.</td>
<td>1 Yes</td>
<td></td>
<td></td>
<td></td>
<td>2 No</td>
</tr>
<tr>
<td>15. I have acquired knowledge about caring for the geriatric population from close friends or family who are caregivers to an adult age 65 or over.</td>
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</tbody>
</table>
Section III: Exposure to Formal Geriatric Social Work Education – This refers to course work or field experience in your current MSW program.

Instruction: Place an (X) in the box that best represents your response. Please select only one response for each statement below.

<table>
<thead>
<tr>
<th>Question</th>
<th>1. Yes</th>
<th>2. No</th>
</tr>
</thead>
<tbody>
<tr>
<td>16. In my MSW program, there are faculty/staff members who have an interest in geriatric social work research/service.</td>
<td></td>
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<tr>
<td>17. I have completed at least one aging course in my MSW program.</td>
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<tr>
<td>18. My MSW program offers a geriatric social work course.</td>
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<tr>
<td>19. I was able to experience geriatric social work in my field placement.</td>
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<tr>
<td>20. My MSW program has a geriatric social work concentration.</td>
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<tr>
<td>21. My MSW program organizes lectures/events that supports and promotes a geriatric social work culture.</td>
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</tbody>
</table>
Section IV: Interest in Geriatric Social Work – This question pertains to your interest in Geriatric Social Work.

Instruction: Place an (X) in the box that best represents your interest. Please select only one response for each question below.

There are also two open ended questions below. Please choose one and write a brief response to why you ARE or ARE NOT interested in Geriatric Social Work.

<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>22. How interested are you in pursuing Geriatric Social Work as a field of study, research or employment venture?</td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>23. If you ARE interested in Geriatric Social Work, briefly explain the factors that have contributed to your interest/why you are interested?</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>24. If you ARE NOT interested in Geriatric Social Work, why?</th>
</tr>
</thead>
</table>

Section V: Demographic Information

Instruction: Place a mark (X) next to the item which best describes you or fill in the blank. Choose only one for each question.


26. Ethnicity: 1)____African-American 2)____Caucasian 3)____Hispanic 4)____Asian  5)____Other

27. Nationality: 1)____United States  2)____Other  If other please list_____________________

28. Education: 1)___1st Year MSW  2)____2nd Year MSW  3)____3rd Year MSW  4)____Graduating 2019  5)___Graduated If graduated please list year____  
6)Other____

29. Marital Status: 1)___Married  2)___Never Married  3)___Divorced  4)___Widow

30. Last Annual Income: 1)___Less than $25,000  2)____$25,000-$34,999  
3)___$35,000-$44,999  4)___$45,000 and up

31. MSW 
Concentration/Specialization:___________________________________________________

32. Graduate School: 1)________Clark Atlanta University  2)_____Kennesaw State University 
3)_________University of Georgia  4)_______________________Other

33. Length of Program: 1)______2 years  2)______3 Years  3)________Advance Standing

Thank you for completing this survey! Your time is appreciated! If you would like to participate in a brief interview, please email your name and contact information to the surveyor:

Dacia D. Davis @ Dacia.Davis@Students.cau.edu
January 23, 2019

Dear Research Participant,

I am a doctoral student at the Whitney M Young, Jr., School of Social Work, and I am studying the factors that influence interest in geriatric social work among Master of Social Work (MSW) students in Metropolitan Atlanta.

Your participation in this study will help to further social work practice and education. Completion of the survey should take no longer than 5-7 minutes of your time. There is no compensation for your participation.

All responses will remain anonymous. Participants DO NOT provide their name on the survey. There is no identifiable information on the survey, aside from very general demographic questions. All surveys will be held in locked files by the Doctoral Program Chair for a period of 3 years, consistent with federal regulations. After this time, all data will either remain locked or will be destroyed. Locked data may be used for future publications or research only and no identifiable data on individual participants will be retained.

There are no risks or consequences should you choose to participate in this study. You can discontinue completing the survey anytime if you choose to do so. Additionally, if you wish to speak to someone about this study, please feel free to contact Dr. Eyitayo Onifade, Director of the WMYJSSW Doctoral Program at the address, phone number or email address below.

BY COMPLETING AND RETURNING THIS SURVEY, YOU ARE INDICATING THAT YOU HAVE READ AND UNDERSTAND THE ABOVE INFORMATION AND THAT YOU HAVE HAD THE OPPORTUNITY TO ASK QUESTIONS ABOUT THE STUDY, YOUR PARTICIPATION, AND YOUR RIGHTS. RETURNING THIS SURVEY INDICATES THAT YOU VOLUNTARILY AGREE TO PARTICIPATION IN THIS STUDY. THANK YOU FOR AGREETING TO TAKE PART IN THIS IMPORTANT STUDY!

Dacia Davis, Doctoral Candidate
WMYJSSW/Clark Atlanta University
223 James P. Brawley Drive, SW
Atlanta, Georgia 30314
Phone: 678-358-4639  
Dacia.Davis@students.cau.edu

Dr. Eyitayo Onifade, Director
WMYJSSW/Clark Atlanta University
223 James P. Brawley Drive, SW
Atlanta, Georgia 30313
Phone: 404-880-8091  
Eonifade@cau.edu
APPENDIX C

IRB APPROVAL LETTER

CLARK ATLANTA UNIVERSITY
Institutional Review Board
Office of Sponsored Programs

January 20, 2019

Ms. Dacia Davis <Donyedd1@yahoo.com>
School Social Work
Clark Atlanta University
Atlanta, GA 30314

RE: A Study of Factors that Influence Interest in Geriatric Social Work Among Master of Social Work Students in Metropolitan Atlanta.

Principal Investigator(s): Dacia Davis

Human Subjects Code Number: HR2019-1-830-1

Dear Ms. Davis:
The Human Subjects Committee of the Institutional Review Board (IRB) has reviewed your protocol and approved of it as exempt in accordance with 45 CFR 46.101(b)(2).

Your Protocol Approval Code is HR20191830-1A

Type of Review: Exempted

This permit will expire on January 19, 2020. Thereafter, continued approval is contingent upon the annual submission of a renewal form to this office.

The CAU IRB acknowledges your timely completion of the CITI IRB Training in Protection of Human Subjects – “Social and Behavioral Sciences Track”.


If you have any questions, please contact the IRB Office or Dr. Paul I. Musey, (404) 880-6337.

Sincerely,

[Signature]

Paul I. Musey, Ph.D.
Chair, IRB
Human Subjects Committee

223 James P. Brawley Drive, S.W. ° ATLANTA, GA 30314-4391 ° (404) 880-8000

Founded in 1869 by consolidation of Atlanta University, 1865 and Clark College, 1869.
REFERENCES


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doi:10.1007/978-94-017-8594-5_2


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