Meeting the Challenges of Teaching Aging Content: Social Work Education at the Forefront

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We all have seen the statistics that exemplify the global increase in the numbers of older adults. For example, by the year 2050, one of every seven people in the world will be at least 65 (*United Nations, 2010*); by 2050 in the United States, more than 20% of the population will be 65 and older, and the sector of the population aged 85 and older is projected to grow to 19 million (*Administration on Aging, 2010*). As individuals reach 85, they are deserving of specific attention by health and human services providers because of increased risk of chronic health conditions and the potential need for informal (family/friends) and formal levels of caregiving. What does this mean for the professional degree programs within our academic institutions? Simply put, it means more training and education for understanding and working with older adults are needed for both faculty and students.

How can aging content be obtained, if academic institutions are not offering gerontology specializations or students are not demanding the education? Even though the older adult population has been increasing in numbers for many years, the number of specialized gerontology programs in social work has decreased. According to the Council on Social Work Education, in 2006–2007, approximately 32% of Masters in Social Work programs offered a specialization in aging compared with almost 50% in the early 1980s. Even when social work programs offer specializations, relatively few students have chosen to take advantage of them. Fewer than 20% of both undergraduate and graduate social work students pursue careers in aging (*Council on Social Work Education [CSWE], 2007*).

The Bureau of Labor Statistics (2004) reports that 60,000–70,000 geriatric social workers will be needed by 2020, but fewer than 10% of that number are now available. Geriatric social work
ranks as one of the top 20 careers in growth potential, in part because issues of aging and older adults are linked with all the fields of practice such as mental health, health care, substance abuse, child welfare, and corrections (CSWE, 2009).

The John A. Hartford Foundation has taken the lead in providing the opportunities and resources for health care professionals and educators, including social workers, to offer education and training for the future workforce providing social work services to older adults and their families. In the Foreword of Transforming Social Work Education, editor Nancy Hooyman and her colleagues Corinne Rieder and James O’Sullivan describe the focus of the John A. Hartford Foundation and introduce the Hartford Geriatric Social Work Initiative (GSWI).

The book’s opening chapter includes an efficient summary of the demographic trends and their implications for social work and a description and explanation of the geriatric workforce shortage and some of the GSWI programs. Then a discussion is presented of the curriculum development and field projects that have evolved into a competency-based educational model to ensure that all BSW and MSW social work students have a basic level of competence in working with older adults and their families. Competency-based education is not new to social work, but it has not been used as a required framework for more than three decades. Competency-based education is not only a model used to teach aging content to social work students, it is a part of the CSWE Educational Policy and Accreditation Standards (EPAS) (CSWE, 2008). Ten competencies and 41 practice behaviors are associated with the 2008 EPAS. Developed out of the GSWI programs, the classroom activities used to meet the gerontology competencies include lectures, readings, role-plays, guest speakers, field trips, and paper assignments. They can be used to operationalize a practice behavior associated with the CSWE EPAS.

In order to ensure that social work students receive a basic level of competence in aging issues, it is imperative that faculty possess teaching and research expertise. One chapter of Hooyman’s book focuses on the mentoring model that frames the Hartford Faculty Scholars’ program. The faculty scholars program includes research mentoring, institutional sponsorship, a professional development plan, a funded research project, and institutes and workshops targeted to build skills in teaching, research, and policy (p. 58). I am pleased that the authors (Berkman, Maramaidi, Kaplan, and Ogden) focused this chapter on the mentoring model, describing how to build the faculty capacity required to meet the needs of our aging society. Mentoring programs are faced with challenges in furthering success and satisfaction for both the mentor and mentee, and this chapter provides the structure needed for potential replication. The mentor and mentee are paired based on areas of interest within gerontology, and most relationships are primarily long distance, though several opportunities for face-to-face contact are provided. Over the last decade, many of the mentees have become mentors themselves, a clear marker of success!

In another chapter, Lubben, Harootyan, and Morano describe the importance of increasing the research, teaching, and policy skills in gerontology of current faculty and cultivating new geriatric scholars prior to their entering their first academic appointment in social work. They also describe the GSWI programs provided to doctoral students pursuing expertise in gerontological research and teaching. Doctoral students are eligible to participate in the program, either at the dissertation or pre-dissertation phase of their doctoral study in social work. The programs provide financial support, mentoring, and professional development opportunities, a great model for other programs to replicate.

Chapter 5 of the book brings us back to competency-based education in social work and the importance of infusing gerontology competencies throughout the social work curriculum. The infusion model described in this chapter begins by focusing on infusing (integrating, not adding on) gerontology competencies at the foundation level and then in the advanced practice areas of health, mental health, and substance use. Through faculty development institutes, instructors are given tools and techniques for infusing aging content throughout courses they currently teach. For example, a faculty member may change a case study they currently teach from that focusing on parenting to one with an intergenerational family. To help meet the goal of providing a basic level of gerontology competence to all social work students, the Council on Social Work Education’s National Center for Gerontological Social Work Education (Gero–Ed Center) disseminates many teaching resources for faculty.

CSWE recognizes field education as the signature pedagogy in social work. In chapter 6, Volland and Wright describe the strengths and lessons learned from the Hartford Partnership Program for Aging Education (HPPAE). This model involves students rotating from one agency to another to gain a broad understanding of working with older adults.
adults and their families. In addition to field rotations, the HPPAE includes the development of a strong university–community partnership, competency-based education, focused recruitment of students to the field of aging, an expanded role for field instructors, and leadership development.

Finally, the book focuses on working with a private foundation and partners from geographically dispersed locations to meet the same goal: preparing gerontologically competent social workers to improve the health and well-being of older adults. The programs under the GSWI are coordinated and run by a virtual team that has occasional in-person meetings at national conferences. This model has proven to be successful in running GSWI’s four major programs: Gero-Ed Center (Virginia and Washington), HPPAE (New York), the Hartford Faculty Scholars Program (New York), and the Hartford Doctoral Fellows/Pre-Dissertation Awards (Massachusetts and New York). The GSWI Coordinating Center is located in the offices of The Gerontological Society of America in Washington, DC.

One challenge of the programs’ geographic dispersal is communicating the same message. The efforts dedicated to the communications and branding efforts of the GSWI has added to its success. Jon Beilenson discusses the importance of forming a common identity, using a common language and logo, and many other strategies to communicate a strong and efficient message about the importance of geriatric social work.

In conclusion, Nancy Hooyman does a fantastic job of including a significant amount of information about each of the GSWI programs (written by the leaders of each of the programs) without getting too bogged down with the details. This book presents one national model for capacity building to develop competent gerontological social workers among faculty, students, community partners, and social work programs. Its biggest contribution is that the strengths, challenges, and lessons learned about each aspect of the GSWI are presented so that replication and sustainability are possible for other substantive areas and fields of practice within social work as well as other disciplines.

I had the privilege of working on one of GSWI’s curriculum development projects as well as being selected as a Hartford Faculty Scholar in 2007. The benefits I have received have been immeasurable, so I am pleased that Transforming Social Work Education: The First Decade of the Hartford Geriatric Social Work Initiative provides a framework for current and future social work students, educators, and practitioners to gain a broader understanding and appreciation of the importance of training and education to meet the needs of the older members of society.

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References
doi:10.1093/geront/gnr088