

The baby boom generation's entry into middle age has heightened the health care professions’ awareness of the coming challenges of caring for larger cohorts of frail elders. One central concern is ensuring that appropriately trained professionals are in place to meet the complex social and health care needs of these older adults.

**An Emerging Crisis?**

In fact, the inadequate number of geriatrically trained personnel available to meet the current level of need, coupled with future projections of a growing number of older Americans, has led some to label the geriatric care workforce problem as an “emerging crisis” (Hudson, 2003). For social work, two core concerns emerge from this professional gap. The first centers on older adults who are not receiving supportive services that may be critical to promoting their independence and well-being. The second involves social work practitioners who do not appear to be pursuing career opportunities to work with a growing older population (Gonyea, Hudson, & Curley, 2004).

In fact, concern over the inadequate numbers of geriatrically trained health care practitioners and researchers has prompted several federally funded initiatives to address this critical need during the past several decades. In a number of cases, social work schools and professional organizations have been recipients of these initiatives and these external resources have contributed to the development or strengthening of aging curricula in social work education. Yet, to this point, there is little evidence that these initiatives ultimately led to more individuals choosing geriatrics as a field of social work professional practice. The National Association of Social Workers (NASW), the profession’s primary voluntary professional organization, has repeatedly surveyed its membership to gain insights into its demographic and work characteristics. Comparison of the NASW data from 1988 to 2000 reveals that the percentage of members who identify aging as their primary practice area has remained slightly below 5%. Similarly, the percentage of NASW members who identified aging as a secondary practice area has also hovered at the 5% mark throughout this 12-year period (Gilberman & Schervish, 1997; Practice Research Network, 2000).

In light of the demographic pressures, various health care professions—medicine, nursing, social work, and psychology—are presently engaged in efforts to better understand: (a) the magnitude of the current and future geriatric labor force shortages, (b) the underlying causes of the geriatric workforce problem, and (c) solutions to increasing the ranks of geriatrically trained personnel. Importantly, the need for cross- or multidisciplinary analyses and collaboration for responding to this demographic imperative is now being recognized by the health professions. Common factors that have an impact on the development of the requisite geriatric care work force include ageism and negative stereotypes of older adults that contribute to health care professionals expressing a preference to work with younger versus older individuals.

Yet, as the four volumes reviewed in this essay suggest, it is also critical to examine the issue of geriatric care within a professional context or framework. The challenge for the social work profession is not simply generating greater numbers of practitioners to work with aging clients; rather, the issue is much more complex. If social work is to respond effectively to an aging society, the profession must better articulate a shared vision of the role of social work in promoting the well-being of older adults, more clearly define “competent” geriatric social work practice, and better demonstrate the benefits of social work interventions in improving the lives of older individuals.

**Responding to the Challenge**

In 1998 the John A. Hartford Foundation, a philanthropic organization with a historic commitment to the health care field, began the Geriatric Social Work Initiative (GSWI) with the goal of improving the care of older adults by increasing the capacity of social workers to care for them. What is particularly significant about the Hartford GSWI is that it represents the first substantial and sustained investment to build social work’s geriatric infrastructure by cultivating early-career faculty and doctoral students to become leaders in gerontological education and research, creating geriatrically rich internships, and strengthening gerontological curricula and teaching tools. It is obviously too early to evaluate whether the Hartford GSWI has achieved its long-term goal of increasing the social work profession’s capacity to serve America’s growing older population. However, the four books discussed here offer preliminary evidence that Hartford’s consistent and dedicated funding is beginning to affect the process of social work education, practice, and research. Indeed, all four books include works by authors who were funded through this program.

*Social Work and Health Care in an Aging Society* is essentially a product of the Hartford GSWI’s Faculty Scholars Program. The editors, Barbara Berkman (professor at Columbia University School of Social Work) and Linda Harootyan (deputy director of The Gerontological Society of America), are respectively the director and program officer for the GSWI Faculty Scholars Program. Ten of the volume’s 16 chapters were written by the first cohort of Faculty Scholars, and the contributors for the remaining chapters were national mentors or staff affiliated with the program. The chapters focus on different types of vulnerable elders (e.g., grandparents raising grandchildren, aging persons with developmental disabilities, older adults with dementia, elder victims of mistreatment) and elders living in different types of environments (e.g., nursing homes, community-based long-term alternatives, private residences) as well as social workers...
performed different roles (e.g., geriatric assessment, case management, counseling, advocacy). Reflecting the social work profession’s “person-in-environment” perspective, several chapters explore the role of social support and social networks in promoting the well-being of older adults as well as the cultural dimensions of health beliefs and practices.

It is important to note that the book was not intended to be an exhaustive analysis of gerontological social work in health care. Even within specific topic areas (chapters) the authors are not presenting state-of-the-art summaries of their respective fields. Rather, the volume is best thought of as offering a map of the ways social work can incorporate the fields of gerontology and health care into professional education, practice, and research. The organizational framework of the chapters suggests that the editors used a deft hand in constructing the text. Each author was instructed to “examine the evidence-based knowledge in their specific area by reviewing prior research, present their own current research, and delineate the needs for further research. … They [were also] asked to make suggestions for integrating this knowledge into the curriculum of master’s degree education programs” (p. 8). The use of a standardized chapter format makes the text an excellent quick reference tool for social work educators who are seeking strategies or approaches to incorporate aging content into their courses. The text also has great utility for social work doctoral students who are beginning to search for possible dissertation topics in the field of aging. By highlighting the work of the Faculty Scholars, the editors seek to emphasize the multiple opportunities available to social workers to make a contribution to the health care outcomes of older adults.

The three remaining texts—Advancing Gerontological Social Work Education; Gerontological Social Work Practice: Issues, Challenges, and Potential; and Social Work Practice with the Asian American Elderly—are special issues of the Journal of Gerontological Social Work that Haworth also chose to copublish simultaneously as books. In Advancing Gerontological Social Work Education, edited by Joanna Mellor and Joann Ivry, the Hartford Foundation’s commitment to the expansion of geriatric education is again very much evident. Mellor, now of the Lighthouse International, was a member of Mount Sinai’s Geriatric Interdisciplinary Team Training (GIT) funded by the Hartford Foundation. Ivry, of Hunter College School of Social Work, was previously affiliated with the GIT and is currently affiliated with a Hartford GSWI practicum development program. Moreover, approximately half of the 15 articles report on projects funded by the Hartford GSWI.

The editors have organized the text into three discrete sections. The initial four articles offer a historical perspective on the development of gerontological social work education, speak to efforts to delineate professional competencies in geriatric social work, stress the importance of an interdisciplinary team approach to geriatrics, and present strategies to increase student interest in social work practice with older adults. Two of these four articles report on the core activities of the CSWE/SAGE-SW Competencies Project funded by the Hartford Foundation. The school-based initiatives articles in the second section “are bound by a common thread … all are funded by the John A. Hartford Foundation” (p. 69). The first article, written by Hartford program officers and providing an overview of the GSWI, is followed by three articles highlighting the experiences of the University of Michigan, Hunter College, and the State University of New York at Albany in implementing a GSWI Practicum Partnership Program. The section’s final chapter offers an overview and rationale for the GSWI Doctoral Fellowship Program. In the volume’s final section, the articles continue to focus on models of innovative classroom and field curricula, including service learning models in interdisciplinary courses, to promote students’ interest and knowledge in gerontology.

Together, the articles highlight the considerable progress being made nationally in developing educational curricula and teaching strategies to create a workforce in social work that is knowledgeable in aging issues. Faculties seeking new direction and methods for strengthening their own program’s commitment to gerontology will therefore find the volume to be of great interest. However, a criticism of the text centers on the significant redundancy across articles. For example, authors repeatedly make the same argument, cite the same studies and statistics regarding America’s growing older population, and emphasize the insufficient numbers of social workers to serve these older adults. The articles also repeat basic descriptions of the Hartford GSWI. A defter hand by the editors might have allowed the authors to explore their respective topics in greater depth versus each author feeling compelled to “make the case” for advancing geriatric social work and explain the Hartford Foundation role.

The editors of Gerontological Social Work Practice: Issues, Challenges, and Potential, Enid Opal Cox, Elisabeth S. Kelchner, and Rosemary Chapin, developed this compendium “to stimulate the ongoing dialogue regarding the role, status and potential of gerontological social work in an aging society” (p. xv). The volume is a compilation of 13 articles that focus on the larger social, political, and economic issues that are reshaping many of our nation’s health and welfare programs and thereby changing the arenas in which geriatric social workers practice. Several articles speak specifically to the themes of global dimensions of population aging and present insights into how other developed nations (e.g., Canada, Japan) are responding to an aging society, as well as explore America’s multiculturalism and its meaning for an increasingly racial and ethnically diverse older population. Two articles, emerging from the Hartford GSWI, address the “disconnect” between social work education and the demographic reality of an aging America as well as the underrepresentation of social work researchers (compared with the other health care professions) among publicly and privately funded gerontological researchers. The remaining articles focus on care within particular policy domains or subpopu-
lations (e.g., health care, mental health care, end-of-life care, elder maltreatment). Collectively, the articles underscore that the political landscape has certainly changed and challenge social work to develop a collective vision and the political will to strengthen the profession’s response to a growing aging population.

Awareness that the America of the 21st century will be much more ethnically and racially diverse has contributed to the rapid growth of the field of ethnogerontology. In the past two decades, more than 30 books and edited volumes exploring aging, ethnicity, and health have been published. In Social Work Practice with the Asian American Elderly, the editor Namkee Choi seeks to increase the cultural competency of social workers so that they are better able to work with Asian American and Pacific Islander elders and their families. The text is a compilation of 10 articles that explore the experiences of five major ethnic groups—Chinese, Japanese, Korean, Indian, and Vietnamese American elders—as they confront the dual challenges of aging and acculturation. Approximately half of the research articles focus primarily on the expression of mental health conditions in Asian American elders, including stress, grief, depression, and dementia. The other articles explore Asian American elders’ utilization of and experiences with formal services, including home health care, nutrition supplement programs, and long-term care facilities. It is perhaps noteworthy that 2 of the 10 articles report on research funded through the Hartford GSWI Faculty Scholars Program.

In the introduction, Choi cautions the reader that the articles are “based upon small samples of specific subethnic groups from geographically limited areas and their findings may not be generalized to other such groups” (p. 2). Yet, she goes on to state that “given the paucity of existing studies, and the solid empirical methods of inquiry—both quantitative and qualitative—adopted by all, each article . . . represents an important small step toward building a social work knowledge base and skills needed to work with Asian American elders.” Indeed, these studies offer social workers greater insights into how members of different Asian American cultural groups perceive normative aging as well as engage in symptom appraisal, disease management, and help-seeking behaviors. They provide convincing evidence that America’s formal care systems cannot be based on an assumption of a culturally monolithic aging population.

A Wake-Up Call

Taken together, these books are pointing the reader in the same direction. Indeed, three core messages are reiterated in all four volumes. The first theme is that the demographic revolution of an aging society is transforming many of our social institutions and that this longevity phenomenon offers both opportunities and challenges for aging individuals, families, and the state. The second message is that the profession of social work must respond to the changing landscape if it is to effectively promote the independence, participation, care and dignity of aging members of society. Finally, the third message is that the social work profession, with its emphasis on the use of strengths-based and empowerment-oriented paradigms, can make a significant contribution by ensuring that these perspectives are incorporated into the practices, programs, and policies for older adults.

Collectively, the books encourage the profession to engage in more expansive thinking about the challenges of caring for elderly members of society in the 21st century. They might also be thought of as delivering a “wake-up call” that if the profession does not respond to an increasingly older and racially diverse society it risks being left behind. As noted by many of the authors, building the capacity of the profession to better meet the needs of older adults and their families requires greater dialogue between social work educators, practitioners, and researchers. Together, these books offer a rich reservoir of information to promote such a dialogue and guide the profession to a shared vision of the role of social work in addressing this demographic imperative.

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References