California State University, Sacramento  
Gerontology Program  

GERONTOLOGY 102/PUBLIC POLICY & ADMINISTRATION 100  
SOCIAL POLICY FOR AN AGING SOCIETY  
INTRODUCTION TO PUBLIC POLICY & ADMINISTRATION  

Spring 2017, Tuesdays, 5:30 to 8:20 p.m.  
Benicia 1025  

Professor Joseph Rodrigues  
Joseph.Rodrigues@csus.edu  
916-217-0252  

Office Hours: Benicia 1015, Tuesdays, 4:45-5:25 p.m.  

I. Course Description  

This course explores the context and process (including ethical dimensions) for policy making by national and California state governments. Applications are developed from students’ and instructor’s areas of interest including K-12 and higher education, land-use policy, and aging issues such as elder advocacy, Social Security, Medicare, and Medicaid. This course also provides some of the background and skills for entry level positions in public or non-profit organizations.  

II. Overview  

This course is intended to enhance understanding of the context and process of public policy making in the United States and California; deepen understanding of the complexities of designing and implementing public policy; build skill at clear, concise analytical writing; and sensitize students to ethical issues and challenges of public policy issues.  

This course will feature a combination of lecture, seminar discussion, an online assignment, student observations and presentations. There will be a strong emphasis on active learning and student participation. We will also take advantage of current events.  

III. Required Reading  


IV. Course Requirements  

B. **Class attendance and participation.** The instructor expects that students will attend class on a regular basis and participate in discussions, assignments, and activities. *If a student is absent for more than one class during the semester, the instructor will subtract from the final grade, ten points for each class missed.*

Students who use their laptops to take notes shall sit near the front of the class and not near the back wall. *Open laptops are for note taking, not Web surfing during class. Please do not use your phone for texting or surfing either.*

An indicator of participation will be the completion of concept maps and the online assignments. Concept maps are worth 10 points each and the online assignments are worth 20 points each.

1. Concept maps delineate ideas and thoughts about the issue or subject that is the basis of the in-class lecture and discussion. Students must turn in maps *no later than the due date indicated on the concept map and Week-at-a-Glance.* You can submit maps to the instructor in person at the beginning of class. On days that we do not have a class meeting, *please e-mail your assignment to Joseph.Rodrigues@csus.edu.* Do not use Blackboard/SacCT to submit assignments.

2. An online assignment is in lieu of class on a particular day. There are three online assignments that are posted in SacCT.

   a. Older Americans Act
   b. Legislative Bill Analysis
   c. Long-Term Care

Students must submit the online assignment *no later than the due date indicated on the assignment and Week-at-a-Glance.* Please e-mail your assignment to Joseph.Rodrigues@csus.edu. Do not use Blackboard/SacCT to submit assignments.

C. **Midterm and Final Examinations.** The midterm will include material covered from the beginning of class. The final will include material covered since the midterm. Test questions will come from the readings, classroom discussions, and online assignments. The instructor will provide a study guide the week before the examinations. The instructor will allow make-up examinations for reasons of health or emergency. *Documentation will be required.*
D. Two critical analyses of newspaper or magazine articles on an aging policy issue. Each student will share two news articles with the class. These articles can be on any public policy issue, e.g., Medicare, Social Security, etc., that interests you and that pertains to older people or aging. These should not be human interest stories about older adults or aging in general. The articles must be on a relevant public policy subject. Articles may be obtained from newspapers, magazines, or the Internet. Students must cite the source and date of the articles. The short oral presentations will be given at the beginning of each class, accompanied by the article with the student's name on it. Sign-ups for presentations will occur on the first night of class. Each article is worth 20 points.

E. Issue Paper: minimum of 1,500 words. The purpose of writing an issue paper is to give students an opportunity to explore a public policy subject about aging and discuss how this issue will affect older adults and their families. In the process, students will improve their research, analytical and writing skills.

Process: Select a public policy issue facing older persons in our society. The issue could be the privatization of Social Security, who should care for the frail elder, the increase of the elder population and its effects on society, the effects of gender, race, ethnicity and income on aging, or another related topic.

1. Quickly write out the issue your paper will address. Try writing it several different ways. Select the one you think best defines the issue.

2. How does this issue affect older adults and their families?

3. Review your writing and determine what you still need to discuss.

4. Research the subject to fill in the missing gaps.

5. Once you have completed these tasks, you are ready to write a rough draft.

6. You must cite at least five scholarly peer-reviewed journals. Internet research, unless it involves journals, is not acceptable.

7. You must use APA format when typing your Issue Paper:
   a. Papers should be double-spaced, using either 12 Arial or Times Roman font.
b. 1" margins on all sides.

c. Page numbers on all upper right hand corner pages, except for Title Page.

d. Include an abstract of your issue paper.

e. Indent five spaces - first line of every paragraph.

f. Sources must be referenced (e.g., Hoyer & Roodin, 2003) in the text of the paper, with corresponding Reference list in APA format listed in alphabetical order at the conclusion of the paper. All direct quotes must be referenced with source and page number.

The purpose of this exercise is to continue to improve writing and analytical skills that are necessary in all professions. Please review the sample APA paper in Blackboard/SacCT. Please feel free to make an appointment with the instructor if you are having difficulty or need suggestions for a topic. You must submit your Issue paper no later than the due date indicated on the Week-at-a-Glance.

V. CSUS Policy on Plagiarism

Plagiarism is the use of distinctive ideas or works belonging to another person without providing adequate acknowledgement of that person's contribution. Regardless of the means of appropriation, incorporating another's work into one's own requires adequate identification and acknowledgement. Plagiarism is doubly unethical because it deprives the author of rightful credit and gives credit to someone who has not earned it. Acknowledgement is not necessary when the material used is common knowledge. When the course is not noted, the following would constitute plagiarism:

A. Word-for-word copying.

B. The mosaic (to intersperse a few words of one's own here and there while, in essence, copying another's work).

C. The paraphrase (the rewriting of another's work, yet still using the fundamental idea or theory) – unless you cite the paraphrase.

D. Fabrication (inventing or counterfeiting sources).

E. Ghost-written material (submitting another's effort as one's own).
It is also plagiarism to neglect quotation marks on material that is otherwise acknowledged. Plagiarism and acts associated with it are cause for disciplinary and/or legal action.

VI. Gerontology Program Writing Rubric

Written communication is the development and expression of ideas through writing for a particular audience and purpose. Gerontology students should be able to communicate effectively through writing, about social phenomena from a social science perspective. There is an expectation that students will avoid first person, slang, and contractions in formal writing. Students will need to use grammar and spell check before submitting assignments. Points will be deducted for poorly written assignments. All Gerontology instructors use the Writing Rubric as an objective way to evaluate your written work (see Attachment #1).

VII. Gerontology Program Presentation Rubric

Oral communication is the development and expression of ideas through presentation for a particular audience and purpose. Gerontology students should be able to communicate effectively orally about social phenomena from a social science perspective. All Gerontology instructors use the Presentation Rubric as an objective way to evaluate your oral presentations (see Attachment #2).

NOTE: All late assignments will have two points a day deducted for each day it is late.

Extra Credit is available up to an additional 10 points toward the final course grade.

Students have the option of attending an educational event on a public policy issue. A two page, double-spaced, typed summary explaining the who, what, when, where, and why of the issue should be addressed. You must submit your extra credit assignment no later than the due date on the Week-at-a-Glance.

VIII. Grading

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Maximum # of Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>News Articles</td>
<td>40</td>
</tr>
<tr>
<td>Class Participation</td>
<td></td>
</tr>
<tr>
<td>Concept Maps</td>
<td>100</td>
</tr>
<tr>
<td>Online Assignment</td>
<td>60</td>
</tr>
<tr>
<td>Issue Paper</td>
<td>100</td>
</tr>
<tr>
<td>Midterm Examination</td>
<td>100</td>
</tr>
<tr>
<td>Final Examination</td>
<td>100</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>500</strong></td>
</tr>
</tbody>
</table>
Grade

Course final grades are earned based upon the following points and scoring:

- 475 – 500 = A
- 450 – 474 = A-
- 425 – 449 = B+
- 400 – 424 = B
- 375 – 399 = B-
- 350 – 374 = C+
- 325 – 349 = C
- 300 – 324 = C-
- 275 – 299 = D+
- 250 – 274 = D
- 225 – 249 = D-
- Below 225 = F

IX. Gerontology Program Learning Outcomes

Upon the completion of the Gerontology Program of study the student will:

A. Demonstrate understanding of fundamental interdisciplinary evidence-based knowledge, skills, values, and current trends as a basis for competent gerontological practice. (1, 2, 5)

B. Demonstrate critical thinking when analyzing diverse and complex aging issues and outcomes for elders, families, and society from an interdisciplinary perspective that is grounded in the sciences, social sciences, and humanities. (1, 2, 3, 5)

C. Synthesize and apply learned interdisciplinary theories and research in applied settings. (1, 2, 3, 4, 5)

D. Demonstrate social and cultural awareness, sensitivity, respect, and support of multiple perspectives when interacting with others. (2, 3, 4, 5)

E. Exhibit personal and social responsibility, and ethical and professional behavior in all settings. (4, 5)

F. Exhibit effective use of basic communication (written, oral and interpersonal) skills and information technology needed in a global information society. (3, 4)

Note: (numbers relate to the five (5) Sacramento State Baccalaureate Learning Goals (2009).)

X. Gerontology Core Competencies

These Gerontology competencies were developed and approved by the Association for Gerontology and Geriatrics in Higher Education (2014) (see the Competencies which are attached to the end of this Syllabus).
CONCEPT MAP #1

Due January 31

Connect the Concept Box with other boxes describing features or concepts that importantly relate to the initial concept.

Contemporary Challenges
Lessons Learned

Conclusions:

How I Will Use Learned Concepts in My Life and Profession
CONCEPT MAP #2

Due February 7

Connect the Concept Box with other boxes describing features or concepts that importantly relate to the initial concept.

Name __________________________

Structural Lag
Lessons Learned

Conclusions:

How I Will Use Learned Concepts in My Life and Profession
CONCEPT MAP #3  Name____________________

Due February 14
Connect the Concept Box with other boxes describing features or concepts that importantly relate to the initial concept.

Population Aging
Lessons Learned

Conclusions:

How I Will Use Learned Concepts in My Life and Profession
Social Security, Medicare & Medicaid

Lessons Learned

Conclusions:

How I Will Use Learned Concepts in My Life and Profession
CONCEPT MAP #5
Name____________________
Due March 14
Connect the Concept Box with other boxes describing features or concepts that importantly relate to the initial concept.

Target Population
Lessons Learned

Conclusions:
How I Will Use Learned Concepts in My Life and Profession
CONCEPT MAP #6  Name__________________________
Due April 4
Connect the Concept Box with other boxes describing features or concepts that importantly relate to the initial concept.

Working & Retirement Lessons Learned

Conclusions:

How I Will Use Learned Concepts in My Life and Profession
CONCEPT MAP #7
Name____________________
Due April 11 – Turn in by e-mail
Connect the Concept Box with other boxes describing features or concepts that importantly relate to the initial concept.

Conclusions:

How I Will Use Learned Concepts in My Life and Profession
CONCEPT MAP #8  Name____________________
Due April 25
Connect the Concept Box with other boxes describing features or concepts that importantly relate to the initial concept.

Diversity & Economic Security
Lessons Learned

Conclusions:

How I Will Use Learned Concepts in My Life and Profession
CONCEPT MAP #9  Name____________________
Due May 2 – Turn in by e-mail
Connect the Concept Box with other boxes describing features or concepts that importantly relate to the initial concept.

Policy Challenges
Lessons Learned

Conclusions:

How I Will Use Learned Concepts in My Life and Profession
CONCEPT MAP #10

Due May 16

Connect the Concept Box with other boxes describing features or concepts that importantly relate to the initial concept.

Means-Testing of Entitlements

Lessons Learned

Conclusions:

How I Will Use Learned Concepts in My Life and Profession
**Attachment #1 - Gerontology Program WRITING Rubric**

Written Communication is the development and expression of ideas through writing for a particular audience and purpose. Gerontology students should be able to communicate effectively through writing, about social phenomena from a social science perspective.

<table>
<thead>
<tr>
<th>1. Purpose and Development</th>
<th>4 = Exceed Expectation</th>
<th>3 = Meet Expectation</th>
<th>2 = Approach Expectation</th>
<th>1 = Below Expectation</th>
</tr>
</thead>
<tbody>
<tr>
<td>A strong sense of purpose controls the development of the presentation. The presentation is extremely focused even though it studies complex ideas. The student demonstrates mastery of the subject.</td>
<td>A clear purpose guides the development of the presentation. The presentation studies increasingly complex ideas and is adequately focused. Student demonstrates an adequate understanding of the subject.</td>
<td>The student generally stays on a fairly broad topic, but has not developed a clear theme. The presenter demonstrates some understanding of the subject, but has not yet focused the topic pass the obvious.</td>
<td>The presentation has no clear sense of purpose or central theme. The student has not yet decided the main idea of the paper or is still in search of a topic, thus demonstrated little understanding of the subject.</td>
<td></td>
</tr>
</tbody>
</table>

| 2. Overall Organization | The organization enhances and showcases the central theme. The order, structure or presentation of information is compelling and smoothly moves the reader through the text. | The organizational structures are strong enough to display a central theme and adequately move the reader through the text. | The organizational structures are not strong enough to display a central theme; therefore the reader is confused sometimes when listening to the presentation. | The presentation lacks a clear sense of direction and identifiable internal structures, which makes it hard for the reader to get a grip on the theme or the main idea. |

| 3. Audience Engagement | The student meets the needs and captivates the interest of the audience throughout the presentation. | The student meets the needs and captivates the interest of the audience throughout most of the presentation. | Sometimes, the student holds the attention of the audience, but does not sustain it throughout. | The student neither meets the needs nor captures the interest of the audience. |

| 4. Control of Syntax and Mechanics | The student demonstrates mastery of standard writing & presentation conventions (e.g. spelling, punctuation, capitalization, grammar, paragraphing, speech clarity) & uses these conventions to enhance presentability. | The student demonstrates an adequate grasp of standard writing & presentation conventions (e.g. spelling, punctuation, capitalization, grammar, paragraphing, speech clarity) despite a few errors. | The student shows a reasonable control over limited range of standard writing & presentation conventions. Conventions are sometimes handled well; at other times, errors distract readability. | The student demonstrates little control of grammar, syntax, and presentation mechanics. The errors distract the reader and make the text hard to read. |

| 5. Summary: Clarity and Revision | The whole presentation is extremely clear and easy to understand. It needs little or no revision. | The presentation is clear and easy to understand, but needs some revision. | Some parts of the presentation are clear, but others are hard to follow. The presentation needs a fair amount of revision. | The presentation is not clear, therefore difficult to follow. The presentation needs significant revision. |

| 6. Citation of Sources (if applicable) | The student consistently cites all of the sources. | The student consistently cites the majority of the sources. | The student consistently cites some of the sources. | Errors occur everywhere when citing the sources. |

| 7. Graphic Presentation (if applicable) | The student demonstrates an innovative use of graphic presentations to communicate a meaningful message. | The student demonstrates an appropriate use of graphic presentations to communicate a meaningful message. | The student used some graphic presentations to communicate a message. | The student does not use graphic presentations where necessary. |
Attachment #2 - Gerontology Program PRESENTATION Rubric

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<td><strong>4. Control of Syntax and Mechanics</strong></td>
<td>The student demonstrates mastery of standard writing &amp; presentation conventions (e.g. spelling, punctuation, capitalization, grammar, paragraphing, speech clarity) &amp; uses these conventions to enhance present-ability.</td>
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GERONTOLOGY COMPETENCIES for Undergraduate & Graduate EDUCATION

Adopted November 20, 2014
GERONTOLOGY COMPETENCIES FOR UNDERGRADUATE & GRADUATE EDUCATION

AGHE COMPETENCY WORKGROUP MEMBERS

Chair: JoAnn Damron-Rodriguez, PhD, LCSW  
– University of California, Los Angeles, CA

Co-Chair: Janet C. Frank, DrPH  
– University of California, and University of Southern California, Los Angeles, CA

Janice Abushakrah, PhD  
– Portland Community College, OR

Jan Jukema, PhD  
– Windesheim University of Applied Sciences, Netherlands

Robert J. Maiden, PhD  
– Alfred University, NY

Alice E. McDonnell, DrPH  
– Marywood University, PA

Birgit Pianosi, PhD, CPG  
– Huntington University, Ontario, Canada

Harvey Sterns, PhD  
– University of Akron, OH and Northeast Ohio Medical University and Chair, AGHE Accreditation Task Force

Dan Van Dussen, PhD  
– Youngstown State University, OH

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Association for Gerontology in Higher Education  
1220 L Street NW, Suite 901  
Washington, District of Columbia 20005 United States  
www.aghe.org
RECOMMENDED CORE COMPETENCIES (10 TOTAL)

CATEGORY I - Foundational Competencies to All Fields of Gerontology

I.1 FRAMEWORKS FOR UNDERSTANDING HUMAN AGING —
Utilize gerontological frameworks to examine human development and aging.

I.2 BIOLOGICAL ASPECTS OF AGING —
Relate biological theory and science to understanding senescence, longevity and variation in aging.

I.3 PSYCHOLOGICAL ASPECTS OF AGING —
Relate psychological theories and science to understanding adaptation, stability and change in aging.

I.4 SOCIAL ASPECTS OF AGING —
Relate social theories and science of aging to understanding heterogeneity, inequality and context of aging.

I.5 THE HUMANITIES AND AGING —
Develop comprehensive and meaningful concepts, definitions and measures for well-being of older adults and their families, grounded in Humanities and Arts.

I.6 RESEARCH AND CRITICAL THINKING —
Distinguish factors related to aging outcomes, both intrinsic and contextual, through critical thinking and empirical research.
RECOMMENDED CORE COMPETENCIES (10 TOTAL)

CATEGORY II - Interactional Competencies Across Fields of Gerontology

II.1 ATTITUDES AND PERSPECTIVES —
Develop a gerontological perspective through knowledge and self-reflection.

II.2 ETHICS AND PROFESSIONAL STANDARDS —
Adhere to ethical principles to guide work with and on behalf of older persons.

II.3 COMMUNICATION WITH AND ON BEHALF OF OLDER PERSONS —
Engage, through effective communication older persons, their families and the community, in personal and public issues in aging.

II.4 INTERDISCIPLINARY AND COMMUNITY COLLABORATION —
Engage collaboratively with others to promote integrated approaches to aging.
SELECTIVE COMPETENCIES (8 TO SELECT FROM)

Programs are recommended to choose a minimum of 2 selective competencies from this category that best reflect the orientation of their program(s).

CATEGORY III - Contextual Competencies Across Fields of Gerontology

III.1 WELL-BEING, HEALTH AND MENTAL HEALTH —
Promote older persons’ strengths and adaptations to maximize well-being, health and mental health.

III.2 SOCIAL HEALTH —
Promote quality of life and positive social environment for older persons.

III.3 PROGRAM/SERVICE DEVELOPMENT —
Employ and design programmatic and community development with and on behalf of the aging population.

III.4 EDUCATION —
Encourage older persons to engage in life-long learning opportunities.

III.5 ARTS AND HUMANITIES —
Promote engagement of older people in the arts and humanities.

III.6 BUSINESS & FINANCE —
Address the roles of older persons as workers and consumers in business and finance.

III.7 POLICY —
Employ and generate policy to equitably address the needs of older persons.

III.8 RESEARCH, APPLICATION AND EVALUATION —
Engage in research to advance knowledge and improve interventions for older persons.

Please review the pages that follow which provide the framework and orientation for these competencies prior to their use.
GERONTOLOGY COMPETENCIES for Undergraduate & Graduate EDUCATION

Adopted November 20, 2014
GERONTOLOGY COMPETENCIES FOR UNDERGRADUATE & GRADUATE EDUCATION

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ORIENTATION TO THE COMPETENCIES

BACKGROUND

In 2012, the AGHE Accreditation Task Force designated two working groups, the Organizational Workgroup and the Competencies Development Workgroup. The 2014 Gerontology Competencies are the result of an AGHE Association-wide multi-year effort that has used feedback processes to build consensus. The effort built upon the work of Wendt, Peterson and Douglas (1993) as well as current literature in foundations of gerontology and competency-based education. The new competencies have integrated the Wendt, Peterson and Douglas (1993) liberal arts, professional and scientific orientations to achieve a more unified approach to the discipline of gerontology. Faculty and students from over 30 universities and colleges involved in gerontology education provided feedback into the consensus building process.

This product of the Competency Workgroup, after integrating the extensive feedback received, is meant as a resource for competency-based gerontology education. It will be the AGHE leadership, with input from the Accreditation Task Force’s Organizational Workgroup and other AGHE Committees, as to how the competencies will be adopted and disseminated. The Workgroup’s framework for the competencies encourages gerontology education programs to maintain their specific orientation (e.g., liberal arts), and utilize the competencies with flexibility and creativity. The competency resource document does not preclude programs from also identifying additional competencies that may be important for their program. Future steps for colleges and universities were noted by Competency Workgroup and responding faculty to include leveling the competence expectations for varying degree levels, building competency-based curriculum materials and constructing competency-based student outcomes measurements.

These competencies rely on a robust definition of a gerontologist: Gerontologists improve the quality of life and promote the well-being of persons as they age within their families, communities and societies through research, education and application of interdisciplinary knowledge of the aging process and aging populations. This definition contributes to the potential impacts of graduates from the field of gerontology education.
FOCUS AND LEVELS OF ANALYSIS

The 2014 Gerontology Education Competencies address the continuum of foci for gerontologists, from micro to macro, as described by Ferraro et al (Wilmoth & Ferraro, 2007). Central to the field is the focus on older persons and their involvement in all aspects of decision making. This focus recognizes their potential, ability to contribute as well as needs. As such, many skills identified in the competencies may be applied at the individual, social network, institutional or societal level. Using this orientation, where ‘older person’ (defined as a person 65 years or older) is utilized in a competency, it may be subsumed even when not stated that this may also include their family, caregiver, and community when appropriate.

APPLICATION OF COMPETENCIES TO GERONTOLOGY EDUCATION

The competencies may be applied to gerontology programs with majors, minors and certificate programs at the associate, undergraduate and/or master’s level. Competency-based education and assessment will require the specification of anticipated knowledge and skill development for the varying program levels. Measurement of competency acquisition will relate to learning objectives, course assignments and evaluation tools.

The competencies are NOT meant to be applied to a gerontology or geriatric focus or specialization within other disciplinary programs (e.g. gero-psychology or geriatric nursing). Other disciplines and departments of study often already have their own set of competencies. These competencies are specific to gerontology education programs and focus on the knowledge, abilities and skills (KAS) of gerontologists.
ORGANIZATION OF AGHE
GERONTOLOGY COMPETENCIES

CATEGORIES

There are three categories of competencies (I, II and III). Category I competencies represent the essential orientation to the field of gerontology, are foundational and expected to be broadly represented in Associate, Bachelors, Master's degree and gerontology certificate programs. Category II competencies are “interactional” competencies that capture the processes of knowing and doing across the fields of gerontology and are also expected to be broadly represented in the above types of educational programs. Category III competencies are meant to capture the most relevant skills for contexts of employment in the variety of sectors and areas that gerontologists may work, including education. Category III competencies are to be selected based on the mission, goals and orientation(s) of the educational program. Competencies in Category III provide gerontology education program leadership with the ability to select and tailor the competency expectations for their particular programs’ needs and orientations. It is suggested that programs select 2 or more Domains, and use the related competencies within that domain for their curricula. Within Category III, programs may identify additional competency content as appropriate for their program orientations and emphases.

CATEGORY COMPONENTS

Within each Category, there are 3 columns presented: The first column lists the Domain for the competency. Domains are broad areas with specific competency statements relating to the particular area. The second column presents the Core Competency statement, which begins with an action verb and is numbered. The third column provides the Recommended Competency Content for the Core Competency. The lists provided in the third column for each competency are also numbered in association with the Core Competency, and begin with action verbs. This list can be easily utilized to form learning objectives relating to the Core Competency and provides more detailed examples of content that can be included in programs representing the Core Competency.
### CATEGORY I: Foundational Competencies To All Fields Of Gerontology — Recommended

<table>
<thead>
<tr>
<th>DOMAIN</th>
<th>CORE COMPETENCY STATEMENT</th>
<th>RECOMMENDED COMPETENCY CONTENT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FRAMEWORKS FOR UNDERSTANDING HUMAN AGING</strong></td>
<td>I. 1</td>
<td>Utilize gerontological frameworks to examine human development and aging.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I.1.1 Employ the Lifespan/Lifecourse perspectives to appreciate age over time in relation:</td>
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<td>▪ To the human life cycle and stages of growth and development within the social context</td>
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<td>▪ To life transitions and adaptive resources</td>
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<td>▪ To the historical context of cohorts</td>
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<td>▪ To age, gender, race and SES within social environments</td>
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<td>I.1.2 Distinguish concepts and theories of aging from a bio-psycho-social framework.</td>
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<td>I.1.3 Synthesize bio-psycho-social understanding of aging to build a gerontological knowledge foundation.</td>
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<td>I.1.4 Interpret the gerontological frameworks in relationship to aspects and problems of aging persons, their families, their environment and communities.</td>
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<tr>
<td><strong>BIOLOGICAL ASPECTS OF AGING</strong></td>
<td>I.2</td>
<td>Relate biological theory and science to understanding senescence, longevity and variation in aging.</td>
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<td>I.2.1 Distinguish normal biological aging changes from pathology including genetic factors.</td>
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<td>I.2.2 Identify major cell-and organ-level systems changes with age.</td>
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<td>I.2.3 Recognize opportunities of reversibility and mutability in later life (e.g. frailty syndromes) and the plasticity of the human brain and body.</td>
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<td>I.2.4 Recognize common late-life syndromes and diseases and their related bio-psycho-social risk and protective factors.</td>
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<td>I.2.5 Identify the implications of biomedical discoveries on individuals and society.</td>
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<td>I.2.6 Synthesize biological with other gerontological ways of understanding human aging:</td>
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| PSYCHOLOGICAL ASPECTS OF AGING | 1.3 Relate psychological theories and science to understanding adaptation, stability and change in aging. | 1.3.1 Describe human growth and development across the lifespan/course including late life outcomes such as life satisfaction, coping and adaptation.  
1.3.2 Recognize normal age changes in intelligence and cognitive abilities including those that may impact late-life functioning.  
1.3.3 Demonstrate knowledge of signs, symptoms and impact of common cognitive and mental health problems in late life (e.g., dementia, depression, grief, anxiety).  
1.3.4 Recognize older persons' potential for wisdom, creativity, life satisfaction, resilience, generativity, vital involvement and meaningful engagement.  
1.3.5 Synthesize psychological with other gerontological ways of understanding human aging:  
  ▪ Biological  
  ▪ Sociological  
  ▪ Humanities |
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<tr>
<td>SOCIAL ASPECTS</td>
<td>I.4</td>
<td>Relate social theories and science of aging to understanding heterogeneity, inequality and context of aging.</td>
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<td>OF AGING</td>
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<td>I.4.1 Appreciate the diversity of the older population based on:</td>
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<td>I.4.2 Assess the impact of inequality on individual and group life opportunities throughout the lifespan/course impacting late-life outcomes.</td>
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<td>I.4.3 Appraise the changing dynamics of contemporary multigenerational families and their impact on social solidarity and interdependence.</td>
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<td>I.4.4 Describe the changing population profile of: your state/province, nation.</td>
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<td>I.4.5 Contrast aging demographics globally among developed and developing countries.</td>
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<td>I.4.6 Distinguish impact of the demographic elements of: fertility, mortality, and immigration.</td>
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<td>I.4.7 Identify how an older population mutually influences and is impacted by policies locally and globally.</td>
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<td>I.4.8 Synthesize sociological and other gerontological ways of understanding human aging:</td>
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**CATEGORY I: Foundational Competencies To All Fields Of Gerontology — Recommended**

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<tbody>
<tr>
<td>THE HUMANITIES AND AGING</td>
<td>1.5</td>
<td>Develop comprehensive and meaningful concepts, definitions and measures for well-being of older adults and their families, grounded in Humanities and Arts.</td>
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<td>1.5.1</td>
<td>Identify conceptual domains explored in Humanities and Arts, as essential to understanding the experience of old age:</td>
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<td>- Time</td>
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<td>- Attention</td>
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<td>1.5.2</td>
<td>Integrate humanities and arts-based understanding of aging into models of gerontological practice and policy.</td>
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<td>1.5.3</td>
<td>Acknowledge and promote unique contributions older adults can make to the social environment.</td>
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<td>1.5.4</td>
<td>Integrate humanistic and artistic understanding with other ways of understanding human aging:</td>
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<td>- Biological</td>
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<td>- Psychological</td>
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<tr>
<td>RESEARCH AND CRITICAL THINKING</td>
<td>I.6</td>
<td>Distinguish factors related to aging outcomes, both intrinsic and contextual, through critical thinking and empirical research.</td>
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<td>I.6.1 Identify and explain research methodologies, interpretations and applications used by different disciplines to study aging.</td>
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<td>I.6.2 Identify gaps in research regarding both aging-related problems and successes in order to promote continued knowledge building</td>
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<td>I.6.3 Generate research questions to solve problems and advance positive strategies related to older adults, their social networks, intergenerational relations and aging societies.</td>
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<td>I.6.4 Design research studies using methods and procedures that produce reliable and valid gerontological knowledge.</td>
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<td>I.6.5 Use critical thinking to evaluate information and its source (popular media and research publications).</td>
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<td>I.6.6 Recognize the strengths and limitations of reliance on either qualitative or quantitative questions, tools, methods and conclusions.</td>
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<td>I.6.7 Promote and apply the use of appropriate forms of evidence-based interventions and technologies for older adults, their families and caregivers.</td>
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## CATEGORY II: Interactional Competencies Across Fields of Gerontology — Recommended

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| **ATTITUDES AND PERSPECTIVES** | II.1. Develop a gerontological perspective through knowledge and self-reflection. | II.1.1 Critique and analyze assumptions, stereotyping, prejudice, and discrimination related to age (ageism) at both:  
  - Personal and  
  - Public levels  
II.1.2 Relate the historical context of the field of gerontology and the evolving roles in:  
  - Research  
  - Education  
  - Commerce  
  - Programs & services  
  - Policy  
II.1.3 Assess and reflect on one's work in order to continuously learn and improve outcomes for older persons. |
| **ETHICS AND PROFESSIONAL STANDARDS** | II.2. Adhere to ethical principles to guide work with and on behalf of older persons. | II.2.1 Respect the person's autonomy and right to real and meaningful self-determination.  
II.2.2 Respect interdependence of individuals of all ages and abilities.  
II.2.3 Respect cultural values and diversity.  
II.2.4 Protect older persons from elder abuse of all types:  
  - Utilize programs and policies that address elder mistreatment and abuse:  
    - Mandatory legal reporting  
II.2.5 Recognize ethical standards and professional practices in all phases of work and research with and on behalf of older persons including but not limited to the following:  
  - Informed consent  
  - Confidentiality  
  - Beneficence  
  - Non-malfeasance  
  - Honesty and Integrity |
## CATEGORY II: Interactional Competencies Across Fields of Gerontology — Recommended

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| COMMUNICATION WITH AND ON BEHALF OF OLDER PERSONS | II.3. Engage, through effective communication older persons, their families and the community, in personal and public issues in aging. | II.3.1 Establish rapport and sustain working relationships with older persons, their families and caregivers.  
II.3.2 Listen and actively engage in problem solving to develop research, programs and policies with key stakeholders including:  
- Older persons  
- Their families  
- Caregivers  
- Communities  
- Researchers  
- Policymakers  
II.3.3 Advocate for and develop effective programs to promote the well-being of older persons.  
II.3.4 Demonstrate effective means to overcome challenges to communicating effectively with persons as they age including:  
- Sensory deficits  
- Disabilities  
- Medical conditions  
II.3.5 Apply and teach caregivers communication techniques to research and practice for elders with dementia.  
II.3.6 Use tools and technology to improve and enhance communication with and on behalf of older persons, their families, caregivers and communities.  
II.3.7 Consider heterogeneity in addressing communication styles and promoting the preferences of older persons including:  
- Cultural  
- Racial/ethnic  
- Cohort  
- SES  
- Health literacy  
- Sexual preference  
- Immigration status  
- Geographical location  
II.3.8 Analyze how older individuals are portrayed in public media and advocate for more accurate depictions of the diverse older population using research based publications and multi-media dissemination methods.  
II.3.9 Develop and disseminate educational materials to increase accurate information regarding older persons and older person services.  
II.3.10 Inform the public of the spectrum of aging services that provide older persons with:  
- Preventive  
- Treatment  
- Supportive programs |
## CATEGORY II: Interactional Competencies Across Fields of Gerontology — Recommended

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| INTERDISCIPLINARY AND COMMUNITY     | II.4. Engage collaboratively with others to promote integrated approaches to aging.         | II.4.1 Perform and promote the roles of the gerontologist in collaborative work on behalf of older persons.  
II.4.2 Respect and integrate knowledge from disciplines needed to provide comprehensive care to older persons and their families.  
II.4.3 Develop interdisciplinary and community collaborations on behalf of the older population in:  
  - Research  
  - Policy  
  - Provision of supports, services and opportunities  
II.4.4 Involve the older person, their family and caregivers as members of the interprofessional care team in planning and service decisions.  
II.4.5 Provide the following groups information and education in order to build a collaborative aging network:  
  - Key persons in the community (police officers, firefighters, mail carriers, local service providers and others)  
  - Aging workforce professionals and personnel (paid and unpaid; full-and part-time) in the field of aging. |
### CATEGORY III: Contextual Competencies Across Fields of Gerontology — Selective

(Based on individual gerontology program orientations and goals, select two or more Domains and use their related competencies)

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<tr>
<td>WELL-BEING, HEALTH</td>
<td>III.1 Promote older persons’ strengths and adaptations to maximize well-being, health</td>
<td>III.1.1 Build relationships that are respectful, confidential and engage positive change.</td>
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<tr>
<td>AND MENTAL HEALTH</td>
<td>and mental health.</td>
<td>III.1.2 Screen and provide referrals to evidence-based programs and interventions.</td>
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<td></td>
<td>▪ Health promotion, disease prevention, assessment and treatment programs</td>
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<td>III.1.3 Counsel older persons about healthcare and social program benefits.</td>
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<td>▪ For the U.S., this would include Medicare, Medicaid, Veterans Services, Social Security, Older Americans Act, Adult Protective Services</td>
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<td>III.1.4 Provide care coordination services for persons with:</td>
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<td>▪ Complex health and mental health problems</td>
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<td>▪ Geriatric syndromes</td>
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<td>III.1.5 Facilitate optimal person-environment interactions.</td>
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<td>▪ Assist in change in lived environment</td>
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<td>III.1.6 Assist caregivers to identify, access and utilize resources that support responsibilities and reduce caregiver burden:</td>
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<td>▪ Assistive devices</td>
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<td>▪ Technology</td>
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<td>▪ Professional services</td>
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<td>▪ Support groups and programs</td>
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<td>III.1.7 Facilitate end of life planning, including:</td>
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<td>▪ Advance care planning</td>
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<td>▪ Palliative Care</td>
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<td>▪ Hospice</td>
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<td>SOCIAL HEALTH</td>
<td>III.2. Promote quality of life and positive social environment for older persons.</td>
<td>III.2.1 Support adaptation during life transitions including:</td>
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<td>▪ Work and retirement</td>
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<td>▪ Family structure changes</td>
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<td>▪ Challenges due to disasters/trauma</td>
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<td>III.2.2 Promote strong social networks for well-being.</td>
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<td>III.2.3 Recognize and educate about the multifaceted role of social isolation in morbidity and mortality risk.</td>
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<td>III.2.4 Provide opportunities for intergenerational exchange and contribution.</td>
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<td>III.2.5 Provide strategies for strengthening informal supports.</td>
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<td>III.2.6 Support the healthy sex life and need for intimacy of older persons of all sexual orientations including:</td>
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<td>▪ Privacy in group living</td>
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<td>▪ Sexual health information</td>
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<td>▪ Accommodation</td>
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### CATEGORY III: Contextual Competencies Across Fields of Gerontology — Selective
(Based on individual gerontology program orientations and goals, select two or more Domains and use their related competencies)

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| PROGRAM/SERVICE DEVELOPMENT | III.3. Employ and design programmatic and community development with and on behalf of the aging population. | III.3.1 Work collaboratively with older persons, local government and community organizations to advocate building age-friendly communities, including:
- Housing
- Design techniques in public space and home environments
- Neighborhood safety
- Transportation
- Physical and social environments that benefit older persons

III.3.2 Construct and evaluate programs for older persons that promote intergenerational relationships.

III.3.3 Design and evaluate leisure and recreational activities which enhance meaning and quality of late life.

III.3.4 Encourage older persons to actively participate in the responsibilities of citizenship including:
- Volunteerism
- Intergenerational contributions
- Identification of public issues and contributions to their solutions.

III.3.5 Counsel individuals to utilize available services that promote well-being and quality of life.

III.3.6 Consider the role of spirituality and religious needs and preferences when:
- Designing, delivering or
- Supporting gerontology programs and services in both secular and faith-based organizations.

III.3.7 Develop and implement programs and services for older persons in collaboration with communities that are founded in:
- Research
- Policies
- Procedures
- Management principles
- Documentation and
- Sound fiscal practice

| EDUCATION                  | III.4. Encourage older persons to engage in life-long learning opportunities. | III.4.1. Promote life-long learning opportunities across the life span to enhance personal development, social inclusion and quality of life. |

| ARTS AND HUMANITIES        | III.5. Promote engagement of older people in the arts and humanities. | III.5.1. Create opportunities for people across the life span in the arts and humanities.

III.5.2 Develop and implement programs promoting creative expression by older persons. |
### CATEGORY III: Contextual Competencies Across Fields of Gerontology — Selective
(Based on individual gerontology program orientations and goals, select two or more Domains and use their related competencies)

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| BUSINESS & FINANCE       | III.6 Address the roles of older persons as workers and consumers in business and finance. | III.6.1 Provide information for employers, policymakers, employees and the general public regarding:  
  - The definitions of older workers  
  - Age Discrimination and Employment Act  
  - Demographics regarding person and older person employment, retirement and current issues of full and part-time work before and after retirement  
  III.6.2 Provide information for employers, policymakers, and employees regarding:  
  - Age issues in management  
  - Age and job performance  
  - Physical and cognitive changes and  
  - Effects on person-job fit  
  III.6.3 Provide research on the “Mature Market” (50+) regarding:  
  - Financial resources  
  - Consumer choices and spending  
  - Approaches to market research and advertising, and  
  - Financial misconduct and fraud |
| POLICY                  | III.7 Employ and generate policy to equitably address the needs of older persons.           | III.7.1 Promote the involvement of older persons in the political process so they may advocate on their own behalf.  
  III.7.2 Analyze policy to address key issues and methods to improve the quality of life of older persons and their caregivers/families.  
  III.7.3 Identify key historical and current policies that influence service provision and support the well-being of older persons such as, in the United States:  
  - The Older American’s Act  
  - Medicare  
  - Medicaid  
  - Affordable Care Act  
  - Social Security |
| RESEARCH, APPLICATION AND EVALUATION | III.8 Engage in research to advance knowledge and improve interventions for older persons. | III.8.1 Conduct research on aging recognizing implications, relationships and applications across disciplines.  
  III.8.2 Use research methods to evaluate and inform services, programs and policies to improve the quality of life of older persons.  
  III.8.3 Investigate problems through collecting and evaluating data to continuously improve outcomes and develop creative and practical solutions to problems relating to older persons. |
AGHE COMPETENCY WORKGROUP MEMBERS

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– Portland Community College, OR

Jan Jukema, PhD
– Windesheim University of Applied Sciences, Netherlands

Robert J. Maiden, PhD
– Alfred University, NY

Alice E. McDonnell, DrPH
– Marywood University, PA

Birgit Pianosi, PhD, CPG
– Huntington University, Ontario, Canada

Harvey Sterns, PhD
– University of Akron, OH and Northeast Ohio Medical University and Chair, AGHE Accreditation Task Force

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– Youngstown State University, OH