

10-1-2014

Predictors of Counseling Students' Decision to Pursue a Gerocounseling Specialization

Thomas W. Foster

Ariann N. Evans

Follow this and additional works at: <https://mds.marshall.edu/adsp>

Recommended Citation

Foster, Thomas W. and Evans, Ariann N. (2014) "Predictors of Counseling Students' Decision to Pursue a Gerocounseling Specialization," *Adultspan Journal*: Vol. 13: Iss. 2, Article 2.

Available at: <https://mds.marshall.edu/adsp/vol13/iss2/2>

This Research Article is brought to you for free and open access by Marshall Digital Scholar. It has been accepted for inclusion in *Adultspan Journal* by an authorized editor of Marshall Digital Scholar. For more information, please contact zhangj@marshall.edu, beachgr@marshall.edu.

Predictors of Counseling Students' Decision to Pursue a Gerocounseling Specialization

Thomas W. Foster, Ariann N. Evans, and Lisa A. Chew

The authors examined which variables predicted the likelihood of counseling students' decision to pursue a gerocounseling specialization by using logistic regression analysis. Results found that overall interest, perceived preparation, training willingness, and importance were predictive factors. Curriculum strategies on how to implement these variables into existing counselor education course work are discussed.

Keywords: gerocounseling, counseling student, counselor education, gerontology

The population of older adults in the United States is at a record high and continues to grow (U.S. Census Bureau, 2011). By 2030, researchers predict that 20% of Americans (72 million) will be age 65 years or older (National Institute on Aging, 2006), and, by 2020, longevity is anticipated to reach 82 years for women and 77 years for men (U.S. Census Bureau, 2011). Though psychological disorders are not typically part of the aging process, the growing population will cause an increase in prevalence rates for depression, anxiety, and substance abuse (National Institute of Health, 2014; National Institute of Mental Health, 2005), and clinical mental health counselors must be prepared to take on this challenge. So, how are students in clinical mental health counseling programs being trained to work with older adults? And what interests do these students have in working with this unique population? The answers to these questions are important for counselor educators to know to prepare for the upcoming need for gerocounseling services and to ensure that they provide adequate training opportunities to students.

Thomas W. Foster, Ariann N. Evans, and Lisa A. Chew, Department of Counseling, Loyola University New Orleans. Correspondence concerning this article should be addressed to Thomas W. Foster, Department of Counseling, Loyola University New Orleans, 6363 St. Charles Avenue, PO Box 66, New Orleans, LA 70118 (e-mail: tfoster@loyno.edu).

© 2014 by the American Counseling Association. All rights reserved.

Although gerocounseling has a 3-decade history within professional counseling (Blake & Kaplan, 1975; Myers, 1995), recent trends suggest that this specialization has lost popularity within the profession. Evidence to support this argument includes the National Board for Certified Counselors discontinuing its gerocounseling certification in 1999 because of a lack of counselors applying for the certification (P. Leary, personal communication, August 7, 2012) and the Council for Accreditation of Counseling and Related Educational Programs (CACREP; 2009) deleting the gerontological counseling track from its 2009 Standards. The rationale for the removal of the gerontological counseling track was because only two counseling programs pursued this accreditation since the implementation of the standards in 1992 (Bobby, 2013). Currently, no association representing professional counseling offers formal certification, training standards, or specialization programs for gerocounseling. In addition, future prospects of any gerocounseling academic standards are not foreseeable; the first draft of the 2016 CACREP Standards does not signify a reinstatement of the original or a new gerontological counseling track for its revised standards (CACREP, 2013). With the increasing number of older adults, and the age-specific challenges they bring to counseling (Foster & Kreider, 2009; Stickle & Onedera, 2006), counseling students will need opportunities to pursue gerocounselor training to serve this population effectively.

Despite minimal attention within the profession, counseling students report a strong interest in gerocounseling. Foster, Kreider, and Waugh (2009) studied counseling students' perceptions of working with older adults. They found a noteworthy overall interest in gerocounseling and strong willingness to seek training. First, counseling students reported being very to somewhat interested in gerocounseling topics, such as grief counseling (70%), family counseling with older adults (63%), counseling caregivers of older adults (55%), and retirement counseling (43%). Students also reported being very to somewhat interested in working with older adults in specific settings, such as private practice (43%) and community mental health agencies (45%). Second, when asked about feeling prepared to work with older adults, students provided mixed results. They described feeling very to somewhat prepared to conduct assessments (42%) and counseling interventions (50%) with older adults, but reported feeling very to somewhat unprepared to work on issues related to grief (55%), retirement (68%), and health problems (53%). When asked about their willingness to seek additional training in gerocounseling, students reported being very to somewhat willing to engage in activities such as course work (61%), workshops (71%), and conferences (66%). Third, the majority of counseling students reported that if they were to work with older adults, it would be very to somewhat important to be knowledgeable about age-related assessment procedures (88%) and interventions (93%), retirement (86%), grief work (94%), and physical health concerns (91%). Finally, Foster et al. asked counseling students: "If your counseling program offered a specialization in

gerocounseling, would you complete the requirements for this specialization?" Forty percent of students responded yes to this question. (For a full description of the results of this study, see Foster et al. [2009].)

Thus, these descriptive findings provide support that counseling students are interested in gerontological topic areas and working environments but generally feel unprepared to work with older adults on specific age-related issues. The findings also indicate that students are willing to seek additional training and acknowledge the importance of understanding age-related issues. So, how do these findings help those counseling programs interested in developing a gerocounseling focus? And how can they be used to influence student interest in engaging in a gerocounseling specialization? Current research cannot immediately address these questions. More data analysis is needed to determine which specific variables most predict the likelihood of students deciding to pursue a gerocounseling specialization. Thus, the purpose of this study was to use advanced analyses to expand upon the results of Foster et al. (2009) to determine which of the variables described above best predict the likelihood of a student's decision to specialize in gerocounseling. It is important for counselor educators to understand which variables relate to a student's decision to seek gerocounseling training, because those variables could be integrated into aspects of their counseling program. Before studying which variables predict student engagement, we must determine the validity of the subscales within the survey developed and used by Foster et al. (2009). Our two research questions for this study are as follows:

1. Which subscales exist within the survey created by Foster et al. (2009)?
2. How does interest in topic areas, interest in work environments, feelings of preparedness, willingness to seek training, and the importance of being knowledgeable about gerocounseling predict the likelihood of students engaging in a gerocounseling specialization?

METHOD

We obtained permission to use the data set compiled by Foster et al. (2009). For the current study, we provide a description of their participants' demographics, their survey instrument, and the procedures they used to collect the data.

Participants

Participants ($N = 385$) consisted of graduate-level students currently enrolled in counselor education programs. Six counseling programs located nationwide provided a convenience sample. The average student age was 29 years, with a range of 20 to 62 years. Four students did not provide their age. Sixty-four of the students were male, and 319 were female. Two students did not respond with their gender. Regarding race, 329 students were Caucasian, 35 were African

American, six were Asian American, three were Hispanic American, two were American Indian, seven classified themselves as other, and three did not respond.

Foster et al. (2009) measured three program levels: master's, doctoral, and other. Three hundred and forty seven students reported being at the master's level, 30 identified themselves as being at the doctoral level, seven reported other, and one did not answer. Students responding with other declared pursuing an education specialist degree or taking additional coursework for state licensure requirements. Students were also asked to list their counseling tracks. Most were enrolled in community counseling ($n = 139$) and school counseling ($n = 156$) programs. The rest were enrolled in doctoral-level counselor education programs ($n = 26$), mental health counseling programs ($n = 26$), marriage and family counseling programs ($n = 3$), a rehabilitation counseling program ($n = 1$), or a combined mental health and school counseling program ($n = 34$). The majority of students ($n = 285$) reported that their counseling programs were CACREP accredited, 92 students reported that their programs were not CACREP accredited, and eight did not know. Finally, responding students reported an average of 23 completed credit hours, with a range of 0 to 114. Ten students did not list how many credit hours they completed.

Instrument

Foster et al. (2009) created a two-part survey with questions pertaining to different aspects of gerocounseling. The first part contains eight questions. The first five questions, based on a 5-point Likert-type scale, questioned students on the following: (a) their interest level in gerocounseling issues, (b) their interests in gerocounseling work environments, (c) their perceived level of preparation in working with older adults, (d) their willingness to seek additional training in gerocounseling, and (e) how important they believed it was for counselors who work solely with older adults to specialize in gerocounseling. Questions 6 through 8 asked students whether a gerocounseling specialization is necessary for counselors who work exclusively with older adults, if they would be willing to complete such a specialization if it were offered, and how many extra classes they would be willing to take for the specialization. The questionnaire's second part involved students' demographic information, such as age, race, program level (i.e., master's, doctoral, or other), program type (e.g., community, rehabilitation), program accreditation status (CACREP vs. non-CACREP), and number of completed credit hours. Completing the survey was estimated to take 10 to 12 minutes. Foster et al. (2009) created this survey instrument based on the guidance of Dillman (2007).

Procedure

Permission was obtained from the institutional review boards of six of the nine recruited universities. Foster et al. (2009) gained authorization to collect data from these six counseling programs. They personally distributed and collected surveys

from four of the programs, while faculty members from the other two programs received and returned them through the mail. Students received a consent letter explaining the rationale for the study and the voluntary nature of participation. Surveys were completed and returned in the same class period. Because of the nature of the data collection strategies, the return rate was high (96%).

RESULTS

We received permission to use the data set collected by Foster et al. (2009), as described earlier. Because the nature of the data has not changed, their descriptive results apply to our study. Refer to Foster et al. (2009) for detailed descriptive results.

Our first research question asked which subscales exist within the survey created by Foster et al. (2009). To answer this question, we completed an exploratory and confirmatory factor analysis using both a varimax and promax solution. Because the results of the two solutions were similar, we present here only the varimax solution because it offered the most simplistic result and is easily replicated (Thompson, 2004). We completed both a scree test (see Figure 1) and an analysis of the eigenvalues. The scree test offered the most pragmatic and helpful solution. Table 1 presents the four-factor varimax rotated factor matrix.

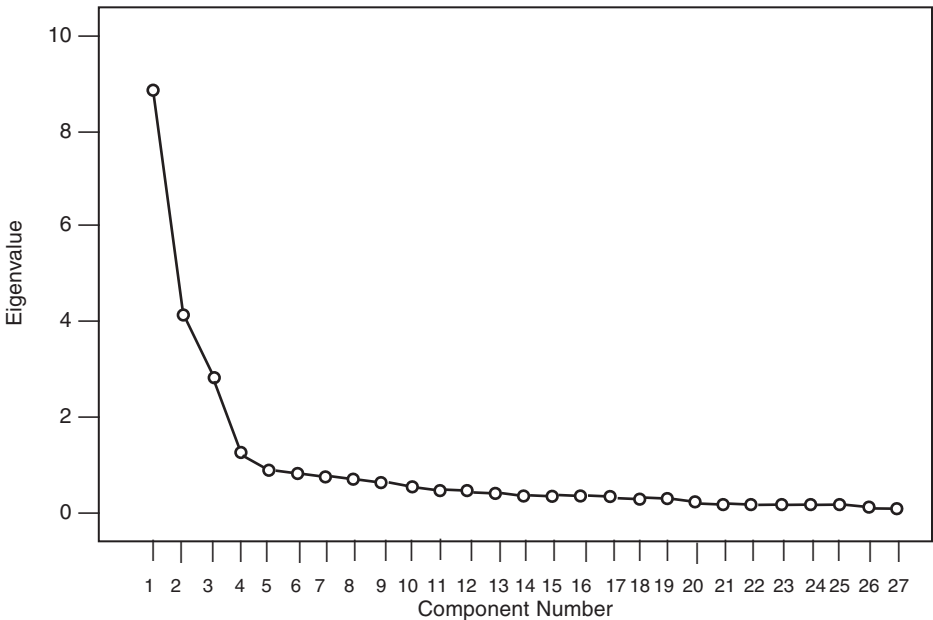


FIGURE 1

Scree Plot

TABLE 1
Four-Factor Varimax Solution

Item	Factor			
	1	2	3	4
1	0.55			
2	0.66			
3	0.68			
4	0.71			
5	0.70			
6	0.78			
7	0.77			
8	0.70			
9	0.72			
10		0.76		
11		0.84		
12		0.68		
13		0.76		
14		0.68		
15		0.72		
16	0.40		0.71	
17	0.45		0.71	
18	0.37		0.67	
19	0.33		0.76	
20	0.35		0.77	
21				0.80
22				0.87
23				0.81
24				0.83
25				0.87
26				0.83
27				0.83

Note. Some items were multivocal (factor pattern coefficients of |.30| or greater on more than one factor), but we placed each item with the factor with which it rated the highest. For specific items, see Foster et al. (2009). Factor 1 = Overall Interest; Factor 2 = Perceived Preparation; Factor 3 = Training Willingness; Factor 4 = Importance.

Our findings suggest that four of the five subscales that Foster et al. (2009) created within their survey instrument are valid. The first subscale we named Overall Interest, which combines the items measuring interest in gerocounseling topics with interest in gerocounseling work environments. The second subscale, named Perceived Preparation, includes all of the items pertaining to counseling students’ feelings of preparedness to work with older adults. We named the third subscale Training Willingness because it contained all of the items that reflected students’ willingness to engage in additional training in gerocounseling. Finally, we termed the fourth subscale Importance because it included all items related to students’ beliefs about how counselors who work solely with older adults should specialize in gerocounseling. Refer to Foster et al. to review the specific items on the survey.

After we validated the subscales using factor analytic procedures, we answered the second question about how these subscales predict the likelihood

of students engaging in a gerocounseling specialization. The criterion variable for this study is whether a counseling student would or would not pursue a gerocounseling specialization, and it is measured categorically (0, 1). Criterion variables that use binary data require logistic regression analysis, and results are described in terms of the odds that the outcome is affected by the predictor variables (Pampel, 2000). We used the standardized coefficients of the four subscales from the factor analysis as the predictor variables.

Our results indicate that overall interest, perceived preparation, training willingness, and importance all were significant at predicting the odds of students engaging in a gerocounseling specialization (see Table 2). The most notable predictor was overall interest. Students who reported a high interest in gerontological topic areas and work environments were 3.85 times more likely to engage in a gerocounseling specialization. The predictor with the second highest odds ratio was importance; students who thought it was important for counselors who work with older adults to be knowledgeable of aging issues and age-specific interventions were 2.56 times more likely to engage in a gerocounseling specialization. Third, students who were more willing to seek out additional gerontological training experiences were 1.47 times more likely to participate in a gerocounseling specialization. Finally, students who reported feeling more prepared to work with older adults were 1.39 times more likely to take part in a gerocounseling specialization.

DISCUSSION

On the basis of our findings, we propose that the subscales Overall Interest, Perceived Preparation, Training Willingness, and Importance all predict the likelihood of counseling students choosing to engage in a gerocounseling specialization. Counselor education faculty can use these constructs as intervention strategies to stimulate interest and motivate the student body toward gerontological issues. In the following sections, we offer curriculum strategies that counselor educators can use to infuse gerontological content into five of the eight core courses of professional counseling (CACREP, 2009).

TABLE 2
Logistic Regression Results

Variable	RE	SE	df	p	OR	CI
Overall Interest	.26	.16	1	.00	3.85	[.19, .36]
Perceived Preparation	.72	.17	1	.04	1.39	[.52, .99]
Training Willingness	.68	.13	1	.00	1.47	[.52, .88]
Importance	.39	.16	1	.00	2.56	[.28, .54]

Note. RE = regression estimate; OR = odds ratio; CI = confidence interval.

Course Infusion

Aging issues permeate many of the core courses within a clinical mental health counseling program, which provides faculty members with many opportunities to integrate gerontological content into existing course work. We offer examples and recommendations for the following courses.

Lifespan Development. The Lifespan Development course covers all developmental points on the lifespan, including the periods of midlife and later adulthood. Counseling faculty could use this course to teach the basic gerontological content related to biological, psychological, and sociocultural development. In addition, discussions can focus on midlife and later adulthood issues, such as the empty nest (Magai & Halpern, 2001), sandwiching (Do, Cohen, & Brown, 2014), retirement (Adams & Beehr, 2003), and successful aging (Rowe & Kahn, 1997, 1998). Faculty teaching this content should be mindful of the four predictor variables in the following ways. First, faculty can expose students to the idea of working with midlifers and older adults by presenting clinical issues related to these times of life. For example, a clinical issue more specific to midlife and later adulthood is caretaking (Stephens & Franks, 1999). Faculty could teach content related to both caretaking and the specific struggles associated with being a caretaker. In addition, they could provide students with a clinical vignette of a distressed family involved in caretaking for an older parent. The students could discuss the vignette in small groups and develop strategies for how they would work with the family. This type of exposure to aging content and clinical application might influence students' perceived preparation to work with caretaking issues, as well as increase their interest in seeking additional training.

Multicultural Counseling. The Multicultural Counseling course could present students with a cultural perspective of aging by examining the between- and within-group differences of generational cohorts. Students would gain insight into how historical events shaped each cohort by learning about the differences between the generations (e.g., Silent Generation, Baby Boomers, Generation X). For example, members of the Baby Boomer generation are in better physical health (Zapolsky, 2003), possess more education, and grew up in a more peaceful time compared with their parents' generation (Maples & Abney, 2006), thus affecting their life perspective. In addition, faculty could expose students to how the within-group differences of a cohort are greater than the between-group differences of cohorts—specifically how people become more unique individuals as they age (Dollinger & Clancy Dollinger, 2003). Examining lifespan development from a cultural perspective adds another dimension of depth to a person's cultural identity and promotes the importance of understanding aging issues from a cultural viewpoint. Viewing aging through a cultural lens can also stimulate interest and keep students' attention on aging issues.

Assessment. Counseling faculty teach a wide array of assessment strategies and the use of various psychological instruments within the Assessment course. When using assessment strategies and instruments, students learn to make

accommodations based on the client's age and cultural makeup. For example, some cultural groups do not normally make eye contact with others, so, when conducting an intake, a counselor would avoid doing so with such a client (Becze, 2007). Another example is making sure that any instrument administered to a client has been validated using the client's demographic makeup (Furr & Bacharach, 2008). Like cultural groups, accommodations for aging clients should be included within the Assessment course. Faculty could present assessment strategies specific to aging issues, such as the appropriate length of a clinical interview, visual and auditory considerations, ergonomics of the furniture, and flexibility of where interviews might need to occur (Edelstein & Kalish, 1999). In addition, faculty could introduce cognitive assessments and instruments that counselors typically use with older adults, such as the Mini Mental Status Examination and Geriatric Depression Scale. Specific geriatric assessment training would likely encourage students to feel more prepared to counsel older adults, emphasize the importance of specialized education, and promote interest in working with this population.

Career Counseling. The Career Counseling course typically teaches students about career theories and models aimed at the beginning of an individual's career, with little emphasis on career issues that midlifers and older adults face. One career issue that faculty could address related to aging is retirement and retirement counseling. A variety of retirement topics exist in the literature, such as forced versus voluntary retirement (Richardson, 1993), bridgework (Shultz, 2003), retirement preparation (Kim & Moen, 2001; Taylor & Doverspike, 2003), wellness, and mattering (Myers & Degges-White, 2007; Schlossberg, 2009). Faculty could introduce retirement issues to the class and describe the process of retirement counseling using individual, group, or couples approaches. This type of training would influence students' perceived preparation to work with retirement issues and possibly increase their interest and willingness to seek additional gerocounselor education.

Research and Program Evaluation. CACREP (2009) requires that the Research and Program Evaluation course prepare students to understand various types of research methodologies and statistical analyses and that students use empirical research as the basis for evidence-based practice. Requiring students to read and critique empirical articles is one strategy often used by faculty to accomplish these goals. Some of these articles could pertain to aging research and expose students to a number of research methodologies on these topics. This assignment would present opportunities to critique research studies, inform practice, stimulate interest in gerontological issues, and help students feel more adequately prepared to work with older adults.

Future Research Implications

The results of the present study confirm that the subscales of Overall Interest, Perceived Preparation, Training Willingness, and Importance all predict the

likelihood of counseling students' decision to engage in a gerocounseling specialization. However, other student variables might contribute to this decision, such as age, race, program type (clinical mental health vs. school counseling), undergraduate major, or number of completed courses in a program. More research is needed to understand how these variables predict students' decision to specialize in gerocounseling.

CONCLUSION

As the U.S. population ages, the need for gerocounseling services will increase. Previous research indicated that counseling students possess an interest in gerocounseling topic areas and specialization (Foster et al., 2009). We set out to determine which variables predicted the odds of a counseling student choosing to pursue a gerocounseling specialization. We discovered that the four subscales (i.e., Overall Interest, Perceived Preparation, Training Willingness, and Importance) found in our logistic regression analysis all significantly predicted the likelihood of a counseling student's decision to pursue gerocounseling. Counselor educators can infuse these variables into their curriculum to stimulate student interest to pursue a gerocounseling specialization either within their counseling program or through other avenues of study.

REFERENCES

- Adams, G. A., & Beehr, T. A. (Eds.). (2003). *Retirement: Reasons, processes, and results*. New York, NY: Springer.
- Becze, E. (2007). Learn to be sensitive to patients' cultural differences. *ONS Connect*, 22, 31.
- Blake, R., & Kaplan, L. S. (1975). Counseling the elderly: An emerging area for counselor education and supervision. *Counselor Education and Supervision*, 15, 156–157.
- Bobby, C. L. (2013). The evolution of specialties in the CACREP standards: CACREP's role in unifying the profession. *Journal of Counseling & Development*, 91, 35–43.
- Council for Accreditation of Counseling and Related Educational Programs. (2009). *2009 standards*. Retrieved from <http://www.cacrep.org/doc/2009%20Standards.pdf>
- Council for Accreditation of Counseling and Related Educational Programs. (2013). *Draft #1 of the 2016 CACREP standards*. Retrieved from <http://www.cacrep.org>
- Dillman, D. A. (2007). *Mail and Internet surveys: The tailored design method*. New York, NY: Wiley.
- Do, E., Cohen, S., & Brown, M. (2014). Socioeconomic and demographic factors modify the association between informal caregiving and health in the sandwich generation. *BMC Public Health*, 14, 362–374. doi:10.1186/1471-2458-14-362
- Dollinger, S., & Clancy Dollinger, S. (2003). Individuality in young and middle adulthood: An autophotographic study. *Journal of Adult Development*, 10, 227–236.
- Edelstein, B., & Kalish, K. (1999). Clinical assessment of older adults. In J. C.avanaugh & S. K. Whitbourne (Eds.), *Gerontology: An interdisciplinary perspective* (pp. 269–304). New York, NY: Oxford University Press.
- Foster, T., Kreider, V., & Waugh, J. (2009). Counseling students' interest in gerocounseling: A survey study. *Gerontology and Geriatrics Education*, 30, 226–242. doi:10.1080/02701960903133489
- Foster, T. W., & Kreider, V. (2009). Reinventing gerocounseling in counselor education as a specialization. *Educational Gerontology*, 35, 177–187. doi:10.1080/03601270802466850
- Furr, R. M., & Bacharach, V. R. (2008). *Psychometrics*. Thousand Oaks, CA: Sage.
- Kim, J. E., & Moen, P. (2001). Moving into retirement: Preparation and transitions in late midlife. In M. E. Lachman (Ed.), *Handbook of midlife development* (pp. 487–527). New York, NY: Wiley.
- Magai, C., & Halpern, B. (2001). Emotional development during the middle years. In M. E. Lachman (Ed.), *Handbook of midlife development* (pp. 310–344). New York, NY: Wiley.

- Maples, M. F., & Abney, P. C. (2006). Baby boomers mature and gerontological counseling comes of age. *Journal of Counseling & Development, 84*, 3–9.
- Myers, J. E. (1995). From “forgotten and ignored” to standards and certification: Gerontological counseling comes of age. *Journal of Counseling & Development, 74*, 143–147.
- Myers, J. E., & Degges-White, S. (2007). Aging well in an upscale retirement community: The relationships among perceived stress, mattering, and wellness. *Adulthood Journal, 6*, 96–110.
- National Institute of Health. (2014). *Senior health*. Retrieved from <http://nihseniorhealth.gov/alpha.html#M>
- National Institute of Mental Health. (2005, April 1). *Mental illness in older adults: Effective treatments*. Retrieved from <http://www.nimh.nih.gov/>
- National Institute on Aging. (2006). *Dramatic changes in U.S. aging highlighted in new census, NIH report*. Retrieved from <http://www.nia.gov/>
- Pampel, F. C. (2000). *Logistic regression: A primer*. Thousand Oaks, CA: Sage.
- Richardson, V. E. (1993). *Retirement counseling: A handbook for gerontology practitioners*. New York, NY: Springer.
- Rowe, J., & Kahn, R. (1997). Successful aging. *Gerontologist, 37*, 433–440.
- Rowe, J., & Kahn, R. (1998). *Successful aging*. New York, NY: Pantheon.
- Schlossberg, N. K. (2009). *Revitalizing retirement: Reshaping your identity, relationship, and purpose*. Washington, DC: American Psychological Association.
- Shultz, K. S. (2003). Bridge employment: Work after retirement. In G. A. Adams & T. A. Behr (Eds.), *Retirement: Reasons, processes, and results* (pp. 214–241). New York, NY: Springer.
- Stephens, M. A., & Franks, M. M. (1999). Intergenerational relationships in later-life families: Adult daughters and sons as caregivers to aging parents. In J. C. Cavanaugh & S. K. Whitbourne (Eds.), *Gerontology: An interdisciplinary perspective* (pp. 329–354). New York, NY: Oxford University Press.
- Stickler, F., & Onedera, J. D. (2006). Teaching gerontology in counselor education. *Educational Gerontology, 32*, 247–259. doi:10.1080/03601270500493974
- Taylor, M. A., & Doverspike, D. (2003). Retirement planning and preparation. In G. A. Adams & T. A. Behr (Eds.), *Retirement: Reasons, processes, and results* (pp. 53–82). New York, NY: Springer.
- Thompson, B. (2004). *Exploratory and confirmatory factor analysis: Understanding concepts and applications*. Washington, DC: American Psychological Association.
- U.S. Census Bureau. (2011). *Age and sex composition: 2010*. Retrieved from <http://www.census.gov/prod/cen2010/briefs/c2010br-03.pdf>
- Zapolsky, S. (2003). *Boomers envision retirement II: 2003 survey of baby boomers' expectations for retirement*. Retrieved from http://assets.aarp.org/rgcenter/econ/boomers_envision_2.pdf