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THE PROFESSIONAL IDENTITY DEVELOPMENT OF GERONTOLOGISTS:
AN EXPERIENTIAL LEARNING APPROACH

A thesis submitted in partial fulfillment of the requirements for the degree of Master of
Science at Virginia Commonwealth University

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Abstract

THE PROFESSIONAL IDENTITY DEVELOPMENT OF GERONTOLOGISTS: AN EXPERIENTIAL LEARNING APPROACH

By Tracey Gendron, M.S.

A thesis submitted in partial fulfillment of the requirements for the degree of Master of Science/Doctor of Philosophy at Virginia Commonwealth University.

Virginia Commonwealth University, 2011

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Professional identity is a complex construct that describes how an individual develops a sense of self-concept within a chosen profession. Professional identity refers to a self definition within a professional role based on attributes, beliefs, values, motives, and experiences (Ibarra, 1999). This study explored the relationships between the professional identity of gerontology graduates and age, career stage, student typology, occupation, and value of experiential learning both quantitatively and qualitatively. Survey results indicate that experiential learning opportunities provide a framework for all gerontology students to gain and apply the skills and knowledge necessary for professional identity development in the field of aging. Findings indicate that experiential learning and mentorship represent important, but different outcomes for students who are new to the field of gerontology vs.

students who are already employed in an aging-related profession prior to enrollment in a graduate gerontology program.

The Professional Identity Development of Gerontologists: An Experiential Learning Approach

Professional identity is a complex construct that describes how an individual develops a sense of self-concept within a chosen profession. Professional identity development (PID) has received a great deal of attention in recent decades with the term profession, professional and professionalism as the subject of much discussion. Disciplines such as nursing, teaching, social work and medicine have defined themselves in the scientific literature as "professions". According to Dall'Alba & Sandberg (2006), a profession is based on systematic and scientific knowledge that is gained in both formal (education) and informal (work) settings. Krejsler (2005) addresses development of professions and their identities using an umbrella approach that views "professional" as an aggregate. He argues that different professions, although diverse, share enough common traits to explore identity development as a whole. This is an essential point in this paper since the literature on professional identity development in gerontology is sparse to non-existent.

Professional identity, on the other hand, refers to a self definition within a professional role based on attributes, beliefs, values, motives, and experiences (Ibarra, 1999). Professional identity development is typically thought to occur during one's early adulthood, upon completion of high school or college education; however today's higher education students present at all ages and stages of the lifespan. This paper takes a developmental approach to the process of professional identity by discussing professional identity as an emerging process that begins in adolescence and progresses through emerging adulthood and throughout the life span. This discussion of development of professional identity begins with

identity formation and proceeds through the literature on student development and career development.

The first goal of this study is to discuss PID as a learning process that impacts both emerging adults as well as mid-life adults. A second goal of this study is to explore the trajectory of professional identity for both students in emerging adulthood (traditional) and students established in adulthood (nontraditional). An additional goal is to explore the effectiveness of experiential and service-learning as a pedagogy that builds an inner sense of professional identity in students in all age groups.

The following sections review the literature on study constructs including the process of identity development, career development, and professional identity development. Literature on lifelong learning is explored within the context of PID. The PID literature is then discussed with a focus on the research and theory that defines experiential learning as a possible tool to bridge academic learning with the development of a professional identity. Finally, the concept of professional identity development in the discipline of gerontology is presented.

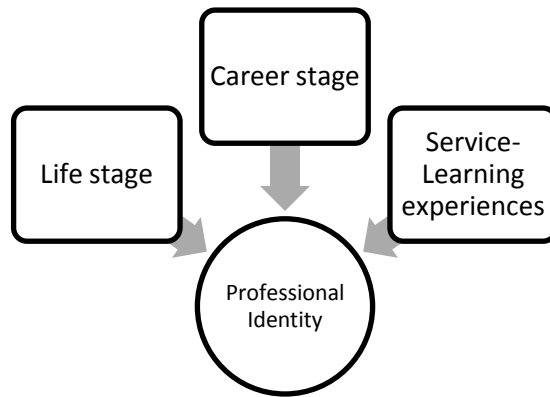
Figure 1 illustrates the relationships explored in this project. Professional identity development (PID) remains the central construct with experiences in service-learning courses, career stage and life stage of student impacting both the level and trajectory of PID.

The Development of Identity: Laying the Foundation

In order to fully address the process of professional identity development, it is first necessary to explore the ways in which self-concept and self-identity are constructed. It is the

foundation and creation of self –identity that determines what life, career, and personal choices are made throughout the lifespan.

Figure 1. Variables Impacting the Development of Professional Identity Development



Developmental stage theorists have viewed self-concept, or self-identity, from a variety of perspectives; however for the purposes of this paper psychosocial theory will be discussed. Psychosocial theory approaches identity development as the interplay between individual phenotypic characteristics within social influences and cultural and historical context. Erikson (1950, 1959, 1963, 1968), a pioneer in the field of developmental psychology, was the first to actualize stages of psycho-social development. Erikson theorized that individuals progress through a series of developmental stages from birth through death. This progression is in the form of eight stages of psychosocial development that each characterize a developmental conflict. The developmental conflict determines if a psychological quality is developed or if there has been a failure to obtain the quality (Erikson, 1950). Erikson also believed that social experience and interaction with the world is key to development of a self-concept, a phenomenon he described as ego identity (Erikson, 1950). Developmental progression occurs as skills and abilities are practiced and

experienced through progressively complicated stages marking advancement toward a more “integrated individual.” Learning how to integrate emotions and intellect can be one of the most challenging tasks of young adulthood and beyond. Individual integration is based upon years of skill building and life experience. It involves identifying and expressing emotion based on intellect, rather than reaction, while concurrently navigating personal behavior within a structured society (Labouvi-Vief, 1995).

The formation of identity is a key component or developmental challenge according to Erikson. The process of identity development requires individuals to define themselves in relation to the world around them. Erikson believed that the process of identity development begins during adolescence in the stage of Identity vs. Role Confusion. It is during this stage that adolescents seek autonomy and begin to develop a unique sense of self identity that is distinguished from parental identities. Marcia (1966) elaborated upon Erikson’s work on identity by highlighting two distinct parts of identity development in adolescence. Marcia’s theory of identity achievement incorporates a succinct decision making process whereby the individual must engage in some degree of struggle and upheaval to explore values and choices (crisis) and then make a decision whether to accept or reject the value (commitment). The trajectory for identity development in adolescents vacillates among individuals. Some adolescents commit to an identity without experiencing a crisis (identity foreclosure), others experience the crisis and achieve a commitment (identity achievement), others experience a crisis without a clear result, meanwhile putting the final decisions on hold (identity moratorium), and finally, some have not yet experienced a crisis or made a commitment (identity diffusion). The latter group, those in identity diffusion, are apathetic and disengaged from figuring out a future for themselves. Marcia posits that it is the degree to which one

has explored and committed to an identity during adolescence that sets the stage for the choices in life domains, such as education and vocation, that most people in our society strive to achieve in adulthood.

Identity development, conceptualized by Erikson (1950, 1968) and Marcia (1966), theorized to occur during adolescence, is followed by a period described by Levinson (1978) as early adult transition. During early adult transition, an individual leaves adolescence behind and begins to prepare for an adult life structure by entering the adult world (Levinson, 1978). This life stage was re-defined by Arnett (2000) as emerging adulthood. Emerging adulthood encompasses the developmental period between the late teens through the mid- to late twenties, roughly ages 18-29. By definition, emerging adults are developmentally at a cross-road between adolescence and adulthood. This is a heterogeneous time period in which emerging adults are experiencing exploration and change related to work, family and education (Arnett, 2000). From a theoretical perspective, emerging adulthood represents an extension of Erikson's (1968) psychosocial moratorium within the fifth stage of development (Schwartz, Cote and Arnett, 2005). Psychosocial moratorium is in essence a "time-out" when one is free to explore various identities within differing social contexts without the necessity to commit to any given role. According to Schwartz, Cote, and Arnett (2005), the continued development of identity plays an integral role in the theory of emerging adulthood. The globalization of the economy and abundance of societal resources and opportunities has impacted how individuals develop a sense of self. In response to the growing number of available opportunities, emerging adults can "individualize" their life course and develop a strong self-identity (Schwartz, Cote, and Arnett, 2005). Options during this time can include

working, traveling, achieving financial independence, or seeking additional education in a college or university setting.

Emerging adults choosing to further their education by enrolling in higher education are faced with incorporating yet a new identity, that of college student. McEwen (2005) categorized student development into three distinct areas: psychosocial development, social identity development, and cognitive-structural development. Psychosocial development encompasses how a person's mind, emotions, and maturity level develop through a social realm. Social identity development is the way in which "individuals construct their various social identities, namely, race, ethnicity, gender and sexual orientation" (McEwen, 2005, p 204). As students mature emotionally and gain exposure to academic theory and professional knowledge, they are concurrently developing a sense of identity in terms of individual self and professional self. Cognitive-structural development addresses how students perceive, organize, and think about their experiences (Perry, 1981). Student development involves academic rigor as well as preparation for career.

Globalization and the growing variety of career choices have expanded the number and types of opportunities for emerging adults and individuals exploring new career paths (Brown, 2003). Career exploration represents an essential building block in the process of professional identity development.

Career Development

Career exploration is a process that, ideally, entails careful thought as well as education and exposure to a variety of job opportunities. Career exploration involves the search between personality characteristics, developing self-concept, and career interests. This

process is referred to in the literature as a goodness of fit model (Vondracek, Lerner & Schulenberg, 1986). The goodness of fit model is characterized by a complex person-context scheme that accounts for both ecological and individual variables that contribute towards career development (Tinsley, 2000; Lerner, 1984). Ecological factors include economic condition, social/educational policy, technological advances and job opportunities, and individual factors include the familial network, peers, school, and work experience (Vondracek, Lerner & Schulenberg, 1986). Career development theory was first conceptualized by Ginzberg, Ginsburg, Axelrad and Herma (1951) who discussed occupational choice as a developmental process consisting of three stages, the fantasy stage (up to 11 years old), the tentative stage (11-17), and realistic stage (17+). During the fantasy stage, children can imagine themselves in a variety of career roles and can “act” them out through play. During the tentative stage, the preteen and adolescent starts to develop more formed ideas of career interests. In the realistic stage, the individual begins to make choices based on personal preferences and abilities.

Super (1957) extended Ginzberg’s stage theory, and defined five life and career developmental stages, outlined in Table 1. Super re-framed career development as a lifelong process that involves self-concepts and occupational preferences changing over time. Super’s work on the role of self-concept and the psychological tasks inherent in each career stage was a major contribution to the field of career development theory and research.

These pioneers in vocational development later expanded their views on the ages at which these decisions are made. Super (1980, 1988) expanded his ideas to develop a life span and life space approach to career development. His ideas not only redefined vocational guidance but were the first to acknowledge how personal growth and change throughout the

life span impact vocational choices and trajectory. Later in his career, Ginzberg (1972) also re-defined occupational choice as a lifelong process involving decision making throughout the lifespan. In addition, Vondracek (1998) provided an expanded view of career development across the entire lifespan.

Table 1.

Super's Career Development Model

Career Stages	Substages	Psychological tasks that characterize each stage	Age range
Growth			Birth-14
Exploration	Crystallization, specification and implementation	To identify interests, capabilities, fit between self and work, and professional self-image	15-24
Establishment	Stabilization, consolidation and advancing	To increase commitment to career, career advancement, and growth To develop a stable work and personal life	25-44
Maintenance	Holding, updating and innovation	To hold onto accomplishments earlier achieved To maintain self-concept	44-64
Decline	Decelerating, retirement planning and retirement living	To develop a new self-image that is independent of career success	65+

The idea of career development as a lifelong process has implications for the study of professional identity development. Of particular relevance is the process of professional identity and career development in middle adulthood. Since the 1970's, there has been an increase in the number of adult students enrolling in institutions of higher education (Sliverstein, Choi & Bulot, 2001). In addition, the ever-changing face of the economy and business practices have caused elimination of millions of jobs (industry) and the creation of millions of new types of jobs (technology). These changes have been the provocation for an

unprecedented number of adults to make a mid-life career change (Vondracek, Lerner, & Schulenberg, 1986).

Expansion of Career Development to Middle Adulthood

Theorists (Super, 1980 and Ginzberg, 1972) have established that career development is a process that is not limited to emerging adulthood. Over his 40 year career, Super's career development theory transformed and evolved from "Career Development Theory" to "Developmental Self-Concept Theory" to "Life Span, Life-Space Theory" (Savickas, 1997). Life-space theory accounts for the importance of work in relation to other life roles where career is considered as an aspect of overall development throughout the life span. (Super, 1990). This represents an essential building block in the conceptualization of career development as a lifelong process.

From a theoretical perspective, Erikson (1950) described the central developmental task of middle adulthood as the balancing of generativity and stagnation. Generativity is an expression of giving back to the community and guiding the next generation that can be expressed through socially-valued work. The concept of generativity has broad application to career development. For individuals in careers, generativity can be expressed in the workplace through a sense of mastery and the ability to share learned skills with others (Peterson & Stewart, 1996). In organizations, leaders can practice generativity by caring about the mission of the organization and the welfare of the employees (Slater, 2003).

Working from Erikson's stages of adult development, Levinson (1986) proposed a model of life structure theory that provides an expanded view of adulthood. According to Levinson, midlife is viewed as a period of seeking balance between self needs and the needs of society. Levinson conceives of the life cycle as a series of eras that consist of

developmental tasks that contribute towards the macrostructure of the life structure. (Figure 1) In each developmental stage an individual is striving towards building a life structure through individuation and task accomplishment. Individuation refers to the changing relationship between the self and the external world.

Figure 2. Levinson’s Developmental Periods in the Eras of Early and Middle Adulthood.

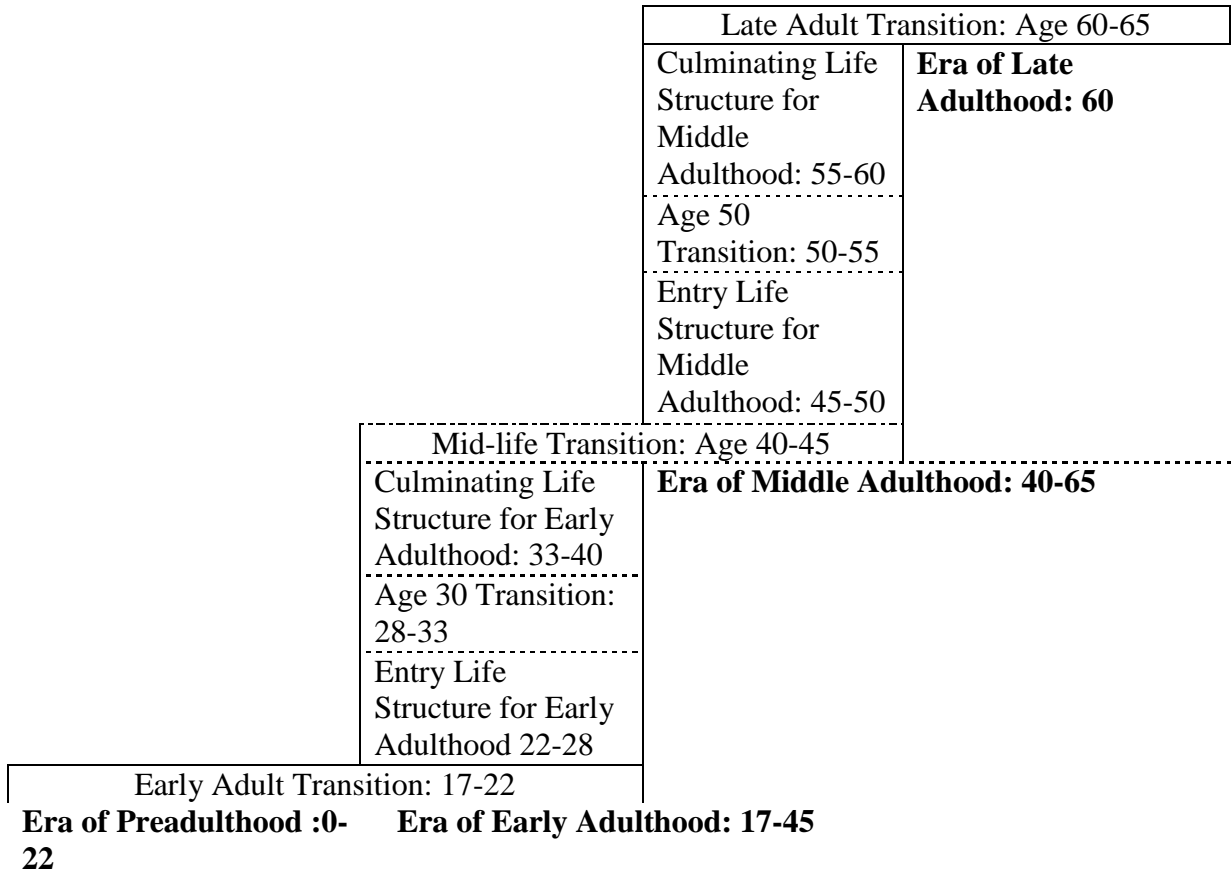


Figure 2. Reprinted from "A Conception of Adult Development," by Levinson, D.J, 1986, American Psychologist, 41, p 8. Copyright 1986 by the American Psychological Association, Inc.

The work of Levinson and associates (in Levinson, Darrow, Klein, Levinson & McKee, 1974) popularized the idea of mid-life crisis and mid-life career change. Mid-life career change can take place due to a variety of circumstances. The elimination and outsourcing of jobs has impacted the careers of mid-life adults (Elman, 2010). However,

there are other, more positive reasons that a mid-life adult may seek a career change. Mid-life career changers are most often seeking more meaningful work and are seeking a better fit between job requirements and rewards (goodness of fit) (Neopolitan, 1980 and Thomas, 1980). From an Eriksonian point of view, an adult may choose to pursue a new career in order to effectively express generativity and preempt stagnation.

Taken as a whole, the available literature reveals that self-identity and career development are processes that most often begin in adolescence, develop further in emerging adulthood, and can continue to develop and change throughout middle adulthood. The processes of identity and career development determine the “goodness of fit” between individual characteristics and vocational responsibilities. Formal and informal education in preparation for a career or profession can impact the development of a professional identity. The process of developing a professional identity begins during one’s training for the profession and continues to evolve as the student identifies with the profession. In order to effectively explore the process of professional identity development it is necessary to define what constitutes a career or profession.

Cultivating Professional Identity Development through Career

Professional development is a body of knowledge and skills acquired and developed through the acquisition of education and practical application (Dall’Alba & Sandberg, 2006). There are various definitions of career and profession including the Merriam-Webster dictionary (2010) which defines a career as: “a field for or a pursuit of consecutive progressive achievement especially in public, professional, or business life”, and “a profession for which one trains and which is undertaken as a permanent calling.”

Defining “Profession.” Not every job can be called a profession, but it is difficult to pin down exactly what makes a vocation a profession. Within the scholarly literature, there is a lack of clarity regarding the term profession and its operationalization. Much of the theoretical work on professions to date has evolved from a sociological perspective. The functionalist position within sociological thought conceives professions based on structural and attitudinal characteristics. Hall (1969) reflects the functionalist view by characterizing professions based on a multitude of factors including the following: knowledge and practice based on theory, a sense of authority and mastery within the field, guidance based on an ethical code and an inherent sense of professional cultural norms and language. The Neo-Weberian approach within a sociological context provides a different view of professions. Within this approach an occupation achieves status as a profession if it acquires certain rights to control a particular field of work (Krejsler, 2005). Therefore, an occupation must gain authorization or social support from a governmental entity in order to it to define itself as a profession (Krejsler, 2005). For the purposes of this paper, Flexner’s (2001) definition of a profession provides a solid framework from which to proceed. According to Flexner, a profession involves intellectual ability, individual responsibility, and knowledge from education, applied techniques gained from learning, self-organization, and altruistic motivation.

Professions then employ “professionals” who have achieved a level of skillfulness or mastery in order to engage in practice. Professional skill development is the combination of formal and informal learning necessary to develop professional skills (Dall’Alba & Sandberg, 2006). Dreyfus and Dreyfus (1986) proposed a five stage model of skill acquisition that provided much of the groundwork on professional development in nursing,

social work, and teaching. The model represents a series of step-wise stages in which an individual can progress towards increased mastery within a profession (Dreyfus & Dreyfus, 1986). The stages encompass the novice level, advanced beginner level, competent level, proficient level, and expert level. It is only within the expert stage level that a professional feels "at one with" their work.

Professional Identity Development

Professional identity development (PID) represents a specific subset within identity development. Ibarra (1997) discussed development of identity status during the transition between school and career, or between jobs, as key periods of identity adaptation. PID expands upon student identity development by incorporating the knowledge and skills gained from academic study with the self-concept developed through professional experience. PID builds upon the psychosocial, social identity, and cognitive-structural developmental processes inherent in the models of student development discussed by McEwen (2005). In order to effectively acquire a sense of competency and identity within a given profession, a person must have an internal maturity level developed within a social context. In addition, it is essential to have a deeper understanding of "professional socialization," or how people within the profession think and behave.

Krejsler (2005) takes an epistemological approach to PID in order to capture what it means to be a professional and to feel a sense of professional identity. Professional identity is a term that captures the ability to integrate the demands of the work role with individual personality characteristics and styles (Krejsler, 2005). This is in contrast to more simplistic approaches to professional identity, such as Bucher and Stelling's (1977) definition as simply the perception of oneself as a professional. Development of a "self identity" within a

profession consists of identifying oneself as part of the professional group. Although this process is quite subjective in nature, it is an important transition for both the individual and the collective workforce within the chosen discipline.

Each professional discipline has an inherent set of norms, values and ideals that are essential defining factors that provide a framework for expected behaviors and expectations within the profession. Therefore, the development of professional identity can be viewed as a process wherein an individual incorporates the academic learning or training received in preparation for a profession along with the knowledge of the expected behaviors and expectations provided by experience working within the chosen field. (Krejsler, 2005, Flexner, 2001). In other words, professional socialization and development is a social learning process that includes the acquisition of specific knowledge and skills that are required in a professional role along with the development of the values, attitudes, and self-identity components consistent with a specific profession (McGowen & Hart, 1990).

Experiential learning can provide an opportunity for students to experience professional socialization and development during the training phase of their career. Experiential learning is conceptualized as a process of learning that contains interaction of the learning environment to the real environment (Illeris, 2007). Experiential learning can serve as a tool to bridge academic learning with the development of a professional identity.

Professional Identity and Experiential Learning

Ideally, the acquisition of professional identity is obtained from a combination of conventional academic study along with applied, practical learning. Applied, “hands-on” learning is broadly referred to as experiential learning. Experiential learning is learner directed and provides an opportunity to transcend learning from the academic environment to

the real environment (Illeris, 2007). Ibarra (1999) explored issues related to image and identity in professional adaptation. He argues that early in the development of a career, the sense of professional identity is not fully formed, but is rather provisional in nature. He believes that professional adaptation consists of individuals revising their sense of professional identity, which takes place through field experience (Ibarra, 1999). Lending support to Ibarra's position, several studies found evidence that developmental networks influence PID, even in early career stages. (e.g., Sweitzer, 2008, Dobrow & Higgins, 2005). A developmental network consists of professional contacts or relationships that represent a variety of disciplines. Dobrow and Higgins (2005) examined how developmental relationships, specifically developmental networks, enhance people's professional identity. They believe that professional identity can be reinforced by increased opportunity to network with professionals (Dobrow & Higgins, 2005). This can be increased even further by having a "developmental network" of professionals who represent a variety of disciplines (Dobrow & Higgins, 2005).

Taken as a whole the connection between identity development, field experience and experiential learning is reasonably substantiated - providing a theoretical framework that is used in this study. Service-Learning, however, is clearly differentiated from experiential learning. Experiential learning describes the process of learning through experience. Service-Learning is designed to enhance a student's understanding of course content while simultaneously increasing awareness of community issues, promoting self-awareness and cultural diversity (Gellman, Holland, Driscoll, Spring, & Kerrigan, 2001). Much of the initial research on service-learning has focused on student learning, impact on attitudes and sense of civic responsibility. Research has also centered on the programmatic aspect of

service-learning including faculty training, course structure and assessment. To date little research has identified service-learning as a possible bridge to professional identity development.

Service Learning Theory and Professional Identity Development

Service- Learning can be defined as a philosophy, pedagogy, and a methodology. Within service-learning students participate in thoughtfully organized community service activity that: meets the needs of a community, is coordinated with an educational institution, helps foster civic responsibility, enhances the academic curriculum, and offers structured time for reflection (Torres & Sinton, 2000). Service-Learning provides a bridge between academic content and the richness of hands-on experience in a community setting. Academic service-learning postulates that the key to learning is the integration of knowledge and skills combined with life experiences (Flecky & Gitlow, 2011). According to Bringle, Phillips & Hudson (2004), service-learning is a mutually beneficial and reciprocal process for both the community and the educational institution. This mirrors Krejsler's (2005) suggestion that the development of professional identity is driven by a personal commitment that includes a holistic approach to identity development utilizing experiential learning as a tool.

John Dewey is credited with providing the philosophical and pedagogical inspirations for service-learning. The philosopher Dewey (1916) linked the importance of educational practices to societal relationships and responsibilities. Dewey theorized about the links between education and civic responsibility and also highlighted the importance of reflecting upon the experiences. Dewey saw reflection as a bridge between experience and theory. The reflection activity consists of talking and writing about the personal learning achieved while

participating in the project. This has become a crucial component of service-learning pedagogy. Reflection activities include, but are not limited to, writing in a journal, sharing within a group, writing a formal paper, and presenting to a group. Webster-Wright (2009) described the importance of critical reflection in professional learning. Through challenging implicit assumptions and questioning standard practices, the service learning or professional learning can lead to changes in practice (Webster-Wright, 2009).

Research on service-learning and career development is beginning to emerge in the scholarly literature. Feen-Calligan's (2005), examined the construction of PID in the field of art therapy through service-learning and practica. Exploring student's experiences over a semester, findings demonstrate both practicum and service-learning are possible pedagogical approaches for cultivating professional identity. Due to a strong service-learning component in the course, including significant reflection activities, students reported insights that contributed towards their professional identity (Feen-Calligan, 2005). To lend further support to the concept of professional identity development and service-learning, Hall's (2002) career research found that self-awareness can be gained by participating in activities that challenge the individual to process feedback about the self. The opportunity for reflection within the service-learning pedagogy provides the necessary structure for self-reflection which can lead to increased opportunity for identity building.

For adolescents and emerging adults who are working through the development of personal identity, Service- Learning can provide a bridge to assist in the integration of internal psychological processes with external societal experiences and expectations. Service projects can have a significant developmental impact upon adolescents by exposing youth to a new viewpoint in order to gain perspective, regulate emotion, and build social capacity

(Schneider-Munoz, 2009). While there is an abundance of scientific literature on the benefits of service-learning for traditional students, there is a striking lack of research on the use of a service-learning based curriculum on nontraditional students.

The work of Erikson (1950) and Levinson (1986) provide a theoretical framework that can be utilized to assess the impact and benefits of service-learning pedagogy specifically for nontraditional students. Erikson's theoretical model of generativity describes the need to give back to the community through a productive task or accomplishment. Levinson describes midlife as a period of seeking balance between self-needs and the needs of society. Service-Learning and experiential learning methods can provide nontraditional students with a built-in opportunity to practice new academic skills while demonstrating generativity through active community service. In addition, the reflective exercises inherent in service-learning pedagogy can provide opportunities for meaning-making, generativity, and legacy building. Taken as a whole, this suggests that Service- Learning may be a beneficial learning modality for students in all ages, including in middle adulthood.

Service-Learning is one possible pedagogical approach that can be utilized as a tool to enhance the development of professional identity of students throughout the life course, from emerging adults to mid-life career changers. However, the educational and professional needs of students in differing life stages can vary. In addition, the trajectory of identity and career development for the adolescent, emerging adult, and mid-life adult who seek a career within a professional discipline will vary.

Mid-life adults are returning to school for a multitude of reasons including transitioning to a new career, seeking growth within their current career, or entering the workforce after a period of caring for the family. In order to examine the trajectory of PID

for mid-life adults, it is first necessary to research the literature on lifelong learning and the current trends and projections for both extended participation in the workforce and enrollment in higher education.

Lifelong Learning and Professional Identity

Lifelong learning has numerous benefits for both the individual and society. Research has demonstrated that “learning that develops critical awareness, self-understanding and autonomy provides distraction from worries, a positive focus of interest and an element of routine, and it can therefore promote well-being, protect mental health, and help individuals to cope with adversity and ill health” (Hammond, 2004, p. 561). Enrollment in institutions of higher education has primarily been linked to emerging adults, referred to as traditional students, as illustrated in Table 1. According to the Society for the Study of Emerging Adulthood (2010) an emerging adult is defined as the age period between 18-29 years. A student over 30 years of age is referred to as a nontraditional student in this paper. A nontraditional student is defined as an adult who returns to school full- or part-time while maintaining responsibilities of an adult’s life (Cross, 1980). The nontraditional student group currently represents the fastest growing population on U.S. campuses (Brown, 2002). Because developmental needs, issues, and stressors for adults differ considerably from those faced by younger, traditional-age students, all aspects of the college environment must be reconsidered (and often reconfigured) to respond to this growing student population (Benshoff, 1991). The National Household Education Surveys Program (2004) provided the first full report on the educational activities of adults in the United States. This report used data from the Adult Education and Lifelong Learning Survey of the 2001 National Household Education Surveys Program of adults in the United States, gathered from early

January 2000 to mid-April 2001. According to the report, 22% of adults over age 65, 41% of adults aged 51 to 64 and 55% of adults aged 41 to 50 participated in educational opportunities in 2001 (see Table 2). By their definition, educational opportunities comprised college or University degree programs, work-related courses, personal interest courses, ESL, basic skills courses, vocational programs, and apprenticeship programs (U.S. Department of Education, 2001).

Table 2.

Number of Adults and Rates of Participation in Selected Adult Education Activities

Characteristic	Total adults in thousands	Overall participation		College or university degree programs		Work-related courses		Personal interest courses	
		Percent	s.e.	Percent	s.e.	Percent	s.e.	Percent	s.e.
Total	198,803	46	0.5	4	0.2	30	0.5	21	0.5
Age									
16 to 30	46,905	53	1.5	10	0.8	28	1.1	24	1.2
31 to 40	41,778	53	1.4	4	0.4	39	1.3	20	1.0
41 to 50	41,255	55	1.5	4	0.4	42	1.3	21	1.2
51 to 65	39,523	41	1.2	1	0.2	28	1.1	21	1.0
66 +	29,342	22	1.1	#	#	4	0.4	19	1.1
Sex									
Male	94,955	43	0.8	4	0.3	29	0.7	16	0.7
Female	103,848	49	0.8	5	0.3	30	0.7	26	0.7

Source: U.S. Department of Education, National Center for Education Statistics, Adult Education and Lifelong Learning Survey of the National Household Education Surveys Program (NHES), 2001.

Rounds to zero or zero cases in sample.

s.e. is standard error.

Educational opportunities encompass a variety of environments including lifelong learning institutes, leisure learning classes, non degree seeking classes and matriculation in undergraduate and graduate educational programs. According to Sliverstein, Choi and Bulot (2001), nontraditional-age students make up approximately 25% of all students on campus in the United States.

Silverstein et al. (2001) provide an in-depth summary of the research that explores reasons and motivations for older adults to enroll in higher education. Expressive motivations for learning, such as personal satisfaction in the act of learning were more often expressed, rather than the instrumental reasons, such as career- or skill building motivations (Silverstein et al, 2001). However, more than 1,000 people aged 50 and older questioned by AARP (2000) on lifelong learning offered very different results. The AARP study results indicated that over half of the respondents participate in lifelong learning to improve job skills. More than 30 percent of respondents were pursuing education for a degree, certification, or to advance their careers (AARP, 2000).

The above data demonstrate that there are a variety of reasons that nontraditional students are returning to education, including to advance within a current career path or to pursue new opportunities in the workforce. The Bureau of Labor Statistics estimates that by 2014, 41% of adults aged 55 and older will still be in the workplace (2008). Figure 3 demonstrates the workforce participation rates among men and women 55 and older. Seventy percent of men and over 57% of women 55 to 64 years of age were active in the workforce in 2004. In addition, 19% of men and 12% women over 65 remained in the workforce as well. AARP (2009) reported that about half of adults who leave their job between the ages of 65 to 69, move into new jobs, and nearly one-third move into new occupations or new industries.

Mid-life career change, also known as re-careering, or Encore Careers, is an attractive and sometimes necessary alternative for many workers. Reasons for mid-life career change include retiring from a long- term position or seeking to find a more meaningful occupation

that gives add purpose and passion to life. In a fiscal climate of lay-offs and unemployment, displaced older workers may return to higher education as a necessary option.

Figure 3. Older Men and Women in the Workforce

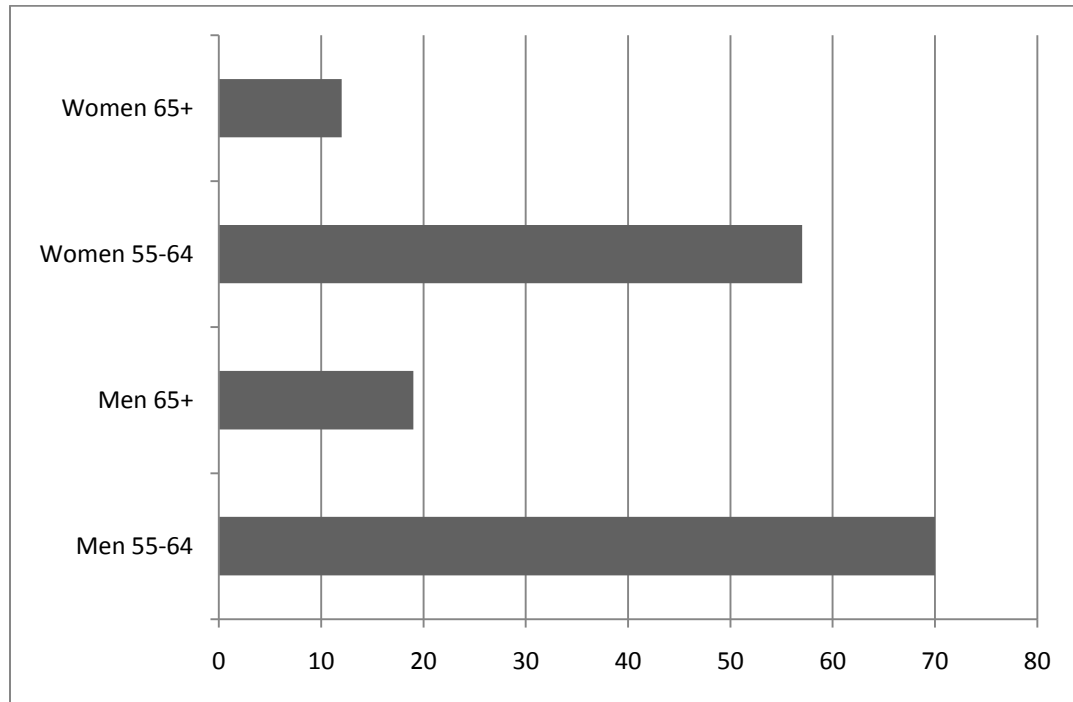


Figure 3. Adapted from American Council on Education. (2007). Framing new terrain: Older adults and higher education. Retrieved from <http://www.acenet.edu/Content/NavigationMenu/ProgramsServices/CLLL/Reinvesting/Reinvestingfinal.pdf>

There is a striking lack of research and theory on the process of development of a professional identity for gerontologists and aging specialists. In order to effectively address the process of PID among both traditional and nontraditional gerontology students, the development of Gerontology as an academic field of study will be discussed.

Professional Identity in Gerontology

Gerontology began as a professional discipline 100 years ago. It has solidified itself as a discipline as evidenced by its professional organizations (e.g., Gerontological Society of

America, American Society on Aging) along with professional gerontological programs in institutions of higher education (the Association for Gerontology in Higher Education), publications (e.g., *The Gerontologist*), and gerontology degree programs that have developed to address the study of aging and the aging process (Alkema & Alley, 2006). Gerontology by nature is a multidisciplinary field of study encompassing the disciplines of sociology, biology, psychology, medicine, nursing, and social work. Professionally, a gerontologist can work as an applied gerontologist (e.g., social services, training), a research gerontologist, an administrative gerontologist (e.g., long term care, assisted living facilities), or an educational gerontologist (e.g. professor or instructor). These varying roles and definitions within the field itself can create an atmosphere of confusion around the professional identity of gerontology.

This vague definition and confusion is evident when conducting a job search for a gerontologist or obtaining occupational data for gerontology as a field. The Bureau of Labor Statistics (BLS) National Employment Matrix (2009) places gerontology-related jobs into numerous and differing industry sectors. For example, gerontologists are found in the industry sector titled Health Care and Social Assistance, as well as in Professional, Scientific and Technical Occupations, Management of Companies and Enterprises, and Educational Services and Other Services. Table 3 reports expected job openings due to growth and replacement needs from 2008 to 2018 according to the Occupational Outlook Handbook for 2010-2011. These BLS statistics demonstrate a number of industries experiencing growth including social and human service assistants, social and community managers and administrative services managers. Many of these projected job openings between 2008 and 2018 include aging-related professions.

Table 3.

Job Openings Due to Growth and Replacement

Occupation	Employment (in thousands)		Employment Change, 2008-2018		Job openings due to growth and replacement needs, 2008-2018 (in thousands)	Most significant source of postsecondary education or training
	2008	2018	Number (in thousands)	Percent		
Social and human service assistants	352.0	431.5	79.4	22.6	153.9	Moderate- term on-the- job training
Social and community services managers	115.8	134.0	18.2	15.7	42.7	Bachelor's degree
Health educators	66.2	78.2	12.0	18.2	26.0	Bachelor's degree
Social scientists and related workers	32.8	40.1	7.4	22.4	23.8	Master's degree
Administrative services managers	259.4	291.7	32.3	12.5	86.6	Bachelor's degree or higher plus experience

Bureau of Labor Statistics (2008). Retrieved from <http://data.bls.gov:8080/oep.noeted.servlet.ActionServlet>

Table 4 provides data from the BLS industry sectors for jobs related to services for the elderly and persons with disabilities. There is projected to be tremendous growth in this industry sector including social and human service assistants (57.8% growth) and community and social service specialists (75.2% growth).

Table 4.

Services for the Elderly and Persons with Disabilities

Occupation	2008		Projected 2018		Change, 2008-2018	
	Employment (in thousands)	Percent of Industry	Employment (in thousands)	Percent of Industry	Number in thousands	Percent
Total, all occupations	584.7	100.00	1,0616.1	100.0	431.4	73.8
Administrative Service Managers	.08	0.13	1.0	0.10	0.2	32.2
Recreational therapists	0.7	0.11	0.9	0.09	0.2	36.0
Financial managers	0.7	0.13	1.0	0.10	0.2	30.8
Education administrators	0.4	0.06	0.5	0.05	0.1	32.5
Instructional coordinators	0.4	0.08	0.6	0.06	0.1	32.8
Social and human service assistants	21.1	3.61	33.3	3.28	12.2	57.8
Social and community services managers	6.7	1.15	8.8	0.86	2.1	31.0
Community and social service specialists	3.8	0.66	6.7	0.66	2.9	75.2
Health Educators	1.4	0.24	2.2	0.22	0.8	57.7

Bureau of labor statistics (2008). Retrieved from <http://data.bls.gov:8080/oep.noeted.servlet.ActionServlet>

Professional Identity Development in Teaching as a Model for Gerontology

Since professional opportunities are rapidly expanding, along with the number of older adults in the United States and across the globe (Association for Gerontology in Higher Education, 2010), it is essential to closely examine both methods used for educating gerontological professionals and tools and strategies for the development of professional identities within the field. There is no relevant research on professional identity development

for gerontologists, and so it is necessary to review the literature on PID from other disciplines.

PID within the profession of teaching began to emerge in the late 1980's (Beijaard, Meijer & Verloop, 2003) and has continued into the 21st century. Much of the research on PID in teaching has been conducted in order to develop a better understanding and conceptualization of the support needed for student teachers (Volkman & Anderson, 1998, Antonek, McCormick & Donato, 1997, Sugrue, 1997). Although professional identity was often not clearly operationalized, some studies defined professional identity as a perception of the professional role, or perception of teachers as an occupational group. The features of professional identity for teachers include professional identity as an ongoing, lifelong learning process, and professional identity as the incorporation of both the unique qualities of the person as well as the knowledge and attitudes which are prescribed by the profession (Beijaard et al., 2004). There is also an abundance of research on career change within the profession of teaching (Chambers, 2002, Bullough & Knowles, 1990; Powell, 1996; Resta, Huling & Rainwater, 2001; and Powers, 1996). Much of the research is concerned with addressing the educational needs of second-career teachers (Resta et al, 2001), while other studies investigated the reasons that draw career changers into the profession of teaching (Crow, Levine and Nager, 1990). Chambers (2002) concluded that second-career teachers differ from traditional entry career teachers in several ways including an altruistic motivational source, personal benefits gained from career change, and the perception of a unique skill set to the job. Most importantly, second-career teachers were found to make use of previously learned skills that assisted in bridging the knowledge from the first to the second-career (Chambers, 2002).

The importance of professional identity in teaching is mirrored in the occupations of nursing and medicine. Professional identity is essential since the knowledge and skills gained during formal education directly impacts the quality of care provided to vulnerable and dependent populations (Fagermoen, 1997). Pratt, Rockman, and Kaufmann (2006) conducted a six-year longitudinal study that tracked medical residents throughout their training program in order to explore the construction of professional identity. Medicine was chosen for this study because it is thought of as a prototypical profession (Hughes, 1956) and embodies all of the characteristics inherent in a definition of a profession. Findings from this study indicated that changes in identity were related to changes in the work role. More specifically, professional identity changes occurred when there was incongruence between a resident's self-identity perception ("who they are") vs. the type and level of work they were performing ("what they do"). This incongruity was often the spark that caused medical students to make systematic changes to their professional identity (Pratt et al., 2006). This highlights the importance of organizational practices giving feedback and providing role models to assist in developing understanding of work roles and professional identity (Pratt et al., 2006).

Role models are important to individuals building professional identity (Melia, 1987, Cohen, 1981). Professional socialization is a process in which the student develops an understanding about what it means to be a professional. This can be modeled by a practicing member of the profession (Cohen, 1981), or by a professional teaching about the discipline (Adams and Hean, 2006). There are a variety of mechanisms whereby professional identity can be cultivated. Adams and Hean (2006) found that professional identity is highest among those with previous work experience, and who have a greater knowledge of their own profession. The literature clearly substantiates that a professional socialization process

including exposure to practicing professionals as role models as well as academic leaders in the field offers an advantage. Gerontology, as an applied discipline, also educates professionals that care for a vulnerable and often dependent population. Therefore, it is important to explore professional identity as a framework for the professional or professional attitudes and value commitments of gerontologists.

Gerontological Education, Service-Learning, and Professional Identity

Gerontological education encompasses more than the scientific study of aging. A competent gerontologist has the ability to translate the foundational knowledge gained in academic study to the practical application in a work or social setting. An academic-practice model in gerontology can effectively promote the development of competent gerontologists.

Experiential learning opportunities, particularly service-learning pedagogy, provides a framework for gerontology students to both gain and apply the skills and knowledge necessary for PID in the field of aging. Service learning activities incorporated into curricula provide students with unique opportunities to experience a variety of job tasks while simultaneously exploring their interests and developing their professional skills. Service-Learning placements for gerontology students might include conducting oral histories, providing support for caregivers, or working with community agencies serving older adults. In these settings, gerontology students will join with the staff in whatever way is helpful and useful to the agency, all the while getting to know the older adults and the professionals who work with them. PID can be cultivated through an Experiential/ Service- Learning model that expose students of diverse life stages and backgrounds to core gerontological content as well as the culture, norms and values of the professional gerontological workforce.

Statement of the Problem and Hypotheses

The Department of Gerontology at the target university has a long-standing history of matriculating an almost equal number of traditional and nontraditional students. In addition, the Department of Gerontology has introduced a programmatic service-learning model into the departmental curriculum goals – infusing learning through service in the education of students in all core courses. The age diversity of the student population also presents an opportunity to explore the issues of PID of both traditional and nontraditional students, while concurrently exploring the effectiveness of service-learning pedagogy on the professional identity development of gerontology students. The goal of the study is to measure professional identity development in a sample of gerontology graduate in order to understand the role of student age at time of study (traditional or nontraditional) and the role of Service Learning.

This study proposed a model that demonstrates that, among professionals who were trained in gerontology, (a) nontraditional students will have higher levels of professional identity development, and that (b) the amount and the perceived usefulness of Service Learning during graduate education will contribute to a higher level of professional identity.

Research Questions and Hypotheses

RQ1. What are the vocational outcomes of graduates of gerontology training programs?

RQ2. How did the academic-practice model impact the career path of graduates?

Hypothesis 1. Participants who gained their schooling in Gerontology as nontraditional students (e.g., students 30 years old or older) will have a higher level of current professional identity (measured by the Clarity of Professional Identity Scale).

Hypothesis 2. Participants who are in 2nd or subsequent careers will report a higher level of professional identity (as measured by the Clarity of Professional Identity Scale) than participants working on a 1st career.

Hypothesis 3. Participants who, as students, participated in more service-learning classes will report a higher level of professional identity (measured by the Clarity of Professional identity scale) than those with fewer service-learning classes.

Hypothesis 4. Participants who reported positive experiences with S-L classes (as measured by S-L value scale) will report a higher level of professional identity (measured by the Clarity of Professional identity scale) than those whose experience was negative.

Method

Participants

The study sample consisted of 146 graduates from 16 gerontology graduate programs in the United States. Seventy five participants were from Virginia Commonwealth University, $n = 22$ from California State University at Fullerton, $n = 7$ from Appalachian State, $n = 6$ from Miami University and $n = 6$ from Georgia University, $n = 5$ from Purdue University, $n = 4$ from Saint Cloud State University, and $n = 9$ from other Universities. The mean age at time of enrollment in a gerontology program was 34.5 (SD = 11.2) with a range of 21 to 63 years of age. Table 5 describes the demographic characteristics of the sample.

Procedure

This study was conducted as an online survey using the Redcap web format. The survey link was distributed to the targeted graduates through an email database maintained

by that department and university. In addition, an invitation to take part in the survey was offered AGHE member institutions.

Table 5

Demographic Characteristics of Participants (N = 146)

Characteristic	<u>n</u>	%
Race/Ethnicity		
Caucasian	118	84
African American	10	7
Asian	8	6
Latino	5	4
Missing	13	
Age at time of enrollment		
21-29 (traditional)	62	56
30-63 (nontraditional)	79	44
Educational Degree Program		
Master's in Gerontology	103	72
MSW/Certificate in Aging	14	10
PhD/Gerontology or related	13	9
Certificate in Gerontology	9	6
Pharmacy/Certificate in Aging	2	1
Certificate in Aging/OT and Rehab	2	1
Prior to enrollment in Gerontology program		
Previous Career	79	57
Undergraduate student	37	27
Non professional job	21	15
Stay at home parent	1	1

Informed consent was explained to all participants before beginning the online survey. Informed consent explained the purpose of the study, expectation for completion, confidentiality and risks in participation. After completing the survey, participants confirmed their consent by clicking “finish” and submitting their survey answers. The survey took approximately 15-20 minutes to complete. Survey items included both closed and open-

ended questions. Survey results were all anonymous and confidential with no identifiers being used in the data collection. No risks or discomforts were anticipated from taking part in this study. Withdrawal from the study was available at any point during the survey. The survey link was emailed to participants from the target universities. Participants also received two email reminders within a one-month period. All email correspondence contained an opt-out message with instructions on how to be removed from the email list. Study procedures were approved by the university's Internal Review Board (IRB).

Measures

AGHE Interview Survey: This standardized survey instrument created by the Association for Gerontology in Higher Education (AGHE) is given to graduates of Gerontology programs. The AGHE survey consists of demographic data, educational history, satisfaction with educational experience and employment history. Only the items relevant to this study were used. Survey items are listed in Appendix 1. Items related to satisfaction with the education experience are rated on a Likert 5 point scale, where 0 = Very dissatisfied, 1 = dissatisfied, 3 = unsure, 4 = satisfied, and 5 = very satisfied.

Career History Measure: The career history measure consists of two questions created for this study (See Appendix 1). The career history measure aims to gather information on the participants' experience in the workplace. These questions capture if the participant engaged in a professional career prior to entering the Gerontology program.

Clarity of Professional Identity Measure (Dobrow & Higgins, 2005): This scale contains a 4-item scale to measure clarity of professional identity. The items are rated on a seven-point Likert scale, where 1= strongly disagree, 4 = neutral, and 7= strongly agree (see

Table 3). These items reflect previous theory and research on identity (Markus and Nurius, 1986; Yost et al., 1992). The internal consistency reliability (Cronbach's alpha) of the scale was .89 for the current sample. A previous study measured reported a 0.90 Cronbach's alpha of .90 and discriminant validity was consistent when differentiating from career planning, career self-efficacy and perceptions of career success measures (Dobrow and Higgins, 2005). The score used is a mean score in which higher scores indicate greater clarity of professional identity.

Service-Learning Evaluation: Five questions regarding service-learning value were used for this study. Value of service-learning is a five-item scale where each item is rated on a Likert 5 point agreement scale, where 0 = strongly disagree, 1 = somewhat disagree, 2 = neither agree or disagree, 3 = somewhat agree, and 4 = strongly agree. Clarity of PI scores was calculated by averaging responses from 4 items measured on a likert scale (Cronbach's alpha = .877). Mean scores were used, with a higher score indicative of more positive outcomes indicated from participation in service-learning courses. In addition, two items were created for this study that captured the number of service-learning classes taken while in the Gerontology program.

Data Analysis Plan

Descriptive statistics include frequencies, means, and standard deviations for life stage, career history, job satisfaction, participation in Service-learning coursework, value of Service-learning and clarity of professional identity. In addition, correlation matrices are utilized to look at relationships between these study variables. Findings are presented for variables of interest through frequencies and contingency tables. Additional variables of interest include occupation, reason for not seeking employment in aging, and career history.

Table 6.

Measurement of Hypothesis

Question	Variables	Scales
H1	Life stage (at time of enrollment in MS Gerontology program) Sense of Professional Identity	Traditional (18-29) vs. Nontraditional (30+) Clarity of PI scale <ol style="list-style-type: none"> 1. I have developed a clear career and professional identity. 2. I am still searching for my career and professional identity (reverse coded) 3. I know who I am, professionally and in my career. 4. I do not yet know what my career and professional identity is (reverse coded).
H2	Career history Sense of Professional Identity	<ol style="list-style-type: none"> 1. What were you doing before your enrollment in the Gerontology program? <ul style="list-style-type: none"> - Previous career (please describe) - Undergraduate - Stay at home parent - Family caregiving - Non-professional job Clarity of PI scale
H3	Number of S-L classes Sense of Professional identity	S-L measure - How many Service-learning classes did you take? (0-5) Clarity of PI Scale
H4	Experience with S-L classes Sense of Professional identity	S-L measure – 5 item value scale <ol style="list-style-type: none"> 1. Service-learning course(s) enabled me to: <ol style="list-style-type: none"> a. Apply my skills and knowledge to new situations (0-4) b. Recognize how theories and conceptual models can be applied in real-world situations (0-4) c. Develop a network of professional contacts and/or mentors (0-4) d. Understand how people within the profession think and behave (0-4) e. Better understand my own strengths and weaknesses (0-4) Clarity of PI scale - above

Hierarchical regression analyses were then performed in order to examine relationships between career history, life stage, Service-learning experience, and clarity of professional identity.

The qualitative questions were analyzed based on immersion in the data and repeated sortings, codings, and comparisons that characterize the grounded theory approach. Data generation served the purpose of elaboration of categories and properties as well as verification of emergent concepts and propositions. Analysis began with open coding, which is the examination of minute sections of text comprised of individual words, phrases, and sentences. The emergent codes and categories were then systematically compared and contrasted, yielding increasingly complex and inclusive categories.

Results

Forty two percent of the sample reported that they were already employed in an aging-related position prior to their formal education in gerontology, while, 78% of respondents looked for an aging-related job after they completed the gerontology program. Seventy one percent of respondents have been employed in a professional position working with older adults since receiving the gerontology degree, with 90% intending on remaining in the field of aging.

Table 7 describes the current occupations of survey participants. Twenty two percent of participants ($n = 31$) reported that they did not look for an aging-related job after graduating from a gerontology program. Table 8 describes the reasons reported for not seeking employment after completing a gerontology program. About half of participants who

did not seeking employment after completion of the degree reported that they stayed in their current job or were already working with older adults.

Table 7

Summary Data for Current Occupation (N = 141)

Occupation	<i>n</i>	%
Education (Faculty/Trainers)	34	24
Administrators (Hospital/ALF/SNF/Non-profit)	29	21
Social Services (Social Work/Social Service)	22	16
Geriatric Care Manager	10	7
Professional Direct Care (OT/PT/Psychology, TR, Nursing)	10	7
Research	9	6
Student	8	6
Professional Services (Marketing, Advocacy)	6	4
Private enterprise	6	4
Not Working/Retired	7	5

Table 9 describes the proportion of participants that classified being a gerontologist as part of their professional identity and table 10 describes the proportion of professional identity classification by occupation.

Table 8

Summary Data for Reasons Not Seeking Employment (n = 31)

Reasons Not Seeking Employment	<i>n</i>	%
Stayed in current job/already working with older adults	16	48
Can use skills/knowledge more effectively in another area	6	18
Pursuing another career	4	12
Retired	2	6
Salary too low	2	6
Personal choice	1	3
Family responsibilities	1	3
Lack of opportunity	1	3

Table 9
Gerontology as Part of Professional Identity Classification (N = 145)

Professional Identity	<i>n</i>	%
Being a gerontologist/aging specialist is at the core of my professional identity	84	58
Being a gerontologist/aging specialist is an add-on to my professional identity	56	39
Being a gerontologist/aging specialist is not a part of my professional identity	5	3

Experiential Learning: The majority of respondents (86%) participated in experiential learning, including practicum, field work, internships, clerkships, and apprenticeships. Thirty one percent of respondents ($n = 45$) participated in service-learning courses during the course of their program. Five items were used to measure value of service-learning. These items were rated on a five-point agreement scale, where 0 = strongly disagree, 3 = neutral, and 4 = strongly agree. Table 11 presents the correlation matrix for service-learning variables and professional identity. Developing a network of professional contacts and mentors was most highly positively correlated with professional identity.

Table 10
Gerontology Professional Identity by Occupation (N = 140)

Occupation	Professional identity					
	<u>The core</u>		<u>Add on</u>		<u>Not part</u>	
	<u><i>n</i></u>	%	<u><i>n</i></u>	%	<u><i>n</i></u>	%
Education	16	47	17	50	1	3
Administrators	20	69	8	27	1	3
Social Services	13	62	8	38	-	-
Geriatric Care Manager	9	90	1	10	-	-
Professional Direct Care	3	30	5	50	2	20
Research	3	33	5	56	1	11
Student	5	63	3	38	-	-
Professional Services	5	83	1	17	-	-
Private enterprise	2	33	4	67	-	-
Not Working/Retired	5	71	2	29	-	-

Table 11

Intercorrelations for Service-Learning and Professional Identity

Measure	1	2	3	4	5	6
1.PI	-	-.13	-.09	.25*	.08	-.05
Service-learning course enabled me to:		--	.72**	.63**	.53**	.66**
2. Apply my skills and knowledge to new situations			--	.56**	.49**	.57**
3. Recognize how theories and conceptual models can be applied in real life situations				--	.60**	.56**
4. Develop a network of professional contacts and/or mentors					--	.77**
5. Understand how people within the profession think and behave						--
6. Better understand my own strengths and weaknesses						

* $p < .01$ ** $p < .0001$

Professional Identity: The Clarity of Professional Identity scale represents the central dependent variable in this study. The mean score on the PI scale is 4.34 ($SD = 1.30$). PI scores were calculated for each occupational group. The descriptive statistics for each group are shown in Table 12.

Table 12

PI Scores by Occupation (N= 129)

Occupation	<u>M</u>	<u>SD</u>
Education	4.48	1.34
Administrators	4.75	1.03
Social Services	4.11	1.24
Geriatric Care Manager	5.00	.92
Professional Direct Care	4.35	1.36
Research	3.58	1.81
Student	2.90	.86
Professional Services	4.25	1.31
Private enterprise	5.04	.60

An ANOVA indicated that the group means were significantly different ($F(8, 121) = 2.9, p = .005$). Using Tukey's HSD, it was determined that clarity of professional identity scores were significantly higher for administrators, geriatric care managers, educators, and private enterprise jobs than it was for students. There were no significant differences between the other occupations. An ANOVA test also indicated that PI was significantly different based on race ($F(4, 131) = 3.6, p = .0081$). Using Tukey's HSD, it was determined that PI scores were significantly higher for Whites (4.5) than it was for African Americans (3.0).

Table 13 presents the correlation matrix describing the relationships among dependent and independent variables used in the stepwise regression analyses.

Hierarchical regression models were used to test the relationship of specific predictor variables to the criterion variable, clarity of professional identity. Specifically, the predictive value of age, career history, job satisfaction, and experience with and value of Service-Learning were tested for predicting clarity of professional identity. Stepwise multiple regression analyses examining the relationship of professional identity to predictor variables were run separately to test each hypothesis. The dependent variables were each regressed on the independent and control variables simultaneously. The statistical program then entered the significant variables in a stepwise fashion. Hypotheses 1 concerned the predictive value of age and overall job satisfaction, as well as specific aspects of job satisfaction, to the criterion variable, clarity of professional identity. Age was entered followed by overall satisfaction, satisfaction with salary, number of hours worked, job responsibilities, relationship with supervisor, relationship with coworkers, advancement, and relationship with clients. The nine variables produced an R^2 of .36 ($F(5,102) = 11.02, p < .0001$) for the

Table 13

Intercorrelations for Clarity of PI Scale, Job Satisfaction, Age and Service-Learning

Measure	2	3	4	5	6	7	8	9	10	11	12
1.PI	.18 *	.32*	.28**	.33**	.28**	.35**	.30**	.31**	.17*	.02	-.15
2.Job Satisf. Overall	--	-.13	-.04	.003	.06	.17*	.15	.11	.04	.02	.09
3. Salary		--	.44**	.44**	.24*	.20*	.005	.37**	-.19*	.04	.14
4. Number/ hours			--	.55**	.19*	.31**	.14	.17*	-.12	.03	-.21*
5.Job responsibility				--	.36**	.41**	.24*	.38**	-.19*	.11	-.08
6. Relationship w/supervisor					--	.36**	.19*	.41**	.06	-.003	.01
7. Relationship w/ co-workers						--	.40**	.22*	.04	-.05	-.37**
8. Relationship w/ clients							--	.20*	.14	.46**	.10
9.Advancement								--	-.16*	-.04	.18*
10. Age									--	-.18*	.13
11. SL Value										--	.27*
12. SL Classes											--

* $p < .05$ ** $p < .01$

prediction of professional identity. Results of the regression analysis for hypothesis 1 are presented in Table 14; only those predictors contributing significantly to the regression equation are shown.

Table 14
Regression Analysis for the Prediction of PI by Age and Job Satisfaction (N = 108)

Variable	B	SEB	β	ΔR^2
Step 1				
Satisfaction – Relationship w/coworkers	.57	.15	.33*	.20 *
Step 2				
Salary	.27	.10	.24*	.06*
Step 3				
Overall	.20	.12	.14	.04*
Step 4				
Age	.02	.01	.19*	.04*
Step 5				
Satisfaction – Opportunity for advancement	.23	.11	.19*	.02

* $p < .05$

Overall the variables accounted for 36% of the total variance for professional identity. The independent variables that emerged as significant predictors of PI were relationship with coworkers, followed by salary, overall satisfaction, age, and opportunity for advancement. All variables had a positive effect on professional identity.

Hypothesis 2 concerned the predictive value of perceived career change to professional identity. In this regression, the variables entered were change in career and role prior to entering the gerontology program (previous career, nonprofessional job and undergraduate). The variable “role prior” was re-coded to a dichotomous variable, with undergraduate as a reference category. The two variables produced an R^2 of .02 ($F(1,136) = 2.96, p = .0877$) for the prediction of professional identity. This regression model did not significantly predict clarity of professional identity. In this regression, only change in career

contributed towards the 2% of the variance reported in this analysis and “doing prior” was excluded from the stepwise regression. In addition, change in career had a negative relationship with PI, indicating higher PI scores for those who did not report a change in career. (Table 15)

Table 15

Regression Analysis for the Prediction of PI by Change in Career (N = 114)

Variable	B	SEB	β	R ²
Change in career	-.38	.22	-.15	.02

Hypothesis 3 examined the number of service-learning classes taken, and age as predictors of professional identity. The two variables produced an R² of .04 (F(2,132) = 2.99, $p = .0536$) for the prediction of professional identity. This regression model did not significantly predict clarity of professional identity. Only age contributed nominally towards the variance in this model.

Table 16

Regression Analysis for the Prediction of PI by Number of SL Classes (N = 135)

Variable	B	SEB	β	R ²
Step 1				
Age	.02	.01	.19*	.03*
Step 2				
Number of service-learning classes	-.15	.11	-.12	.01

* $p < .05$

Hypothesis 4 examined the predictive value of service-learning to the criterion variable, clarity of professional identity. Service-learning value questions were entered as follows: Service-learning course(s) enabled me to: Apply my skills and knowledge to new situations, Recognize how theories and conceptual models can be applied in real-world situations,

Develop a network of professional contacts and/or mentors, Understand how people within the profession think and behave, Better understand my own strengths and weaknesses. The variables produced an R^2 of .32 ($F(2,37) = 8.5, p = .0009$) for the prediction of professional identity. Stepwise regression analysis removed the following three service-learning variables from the analysis: Recognize how theories and conceptual models can be applied in real-world situations, Understand how people within the profession think and behave, Better understand my own strengths and weaknesses. Results of the regression analysis for the two variables are presented in Table 17. Overall the variables accounted for 32% of the total variance, with applying skills and knowledge accounting for 22% of the total variance.

Table 17

Regression Analysis for the Prediction of PI by Service-Learning Value (n = 39)

Variable	B	SEB	β	ΔR^2
Step 1				
SL - Develop a network of professional contacts	.92	.23	.70*	.09
Step 2				
SL - Apply my skills and knowledge to new situations	-.88	.25	-.62*	.22*

* $p < .05$

There is a statistically significant negative relationship between the variable service-learning enabled me to apply skills and knowledge to new situations, and clarity of professional identity ($\beta = -.62, p = .0013$). Further examination demonstrates that applying skills and knowledge to new situations is correlated significantly and negatively for students new to the field of gerontology ($r = -.38, p = .0004$) and correlated significantly and positively for students already in an aging-related job prior to enrollment in a gerontology program ($r = .45, p = .0003$).

Qualitative Results

Four open-ended questions were asked of respondents.

1. In your experience, what is the added value of academic training in gerontology?
2. How did your academic training in gerontology impact your career path?
3. How did experiential learning impact your career path?
4. How did experiential learning impact your professional identity?

Data analysis was initiated by repeatedly reading all responses followed by coding responses and developing categories by grouping the responses based on similarities. One hundred and sixteen participants responded to the open-ended questions. Categories were then converged by examining recurring regularities in the data. Categories were judged by two criteria: internal homogeneity and external heterogeneity.

Internal homogeneity describes how the data in a certain category hold together in a meaningful way, external heterogeneity describes the extent to which the differences between the categories are clear (Patton, 2002). Two coders worked with the data independently developing coding schemes and categories. Coding and categories were then compared for similarities and differences providing validity.

Added Value of Academic Training: A content analysis was performed on the question; what is the added value of academic training in gerontology. Content analysis is used to refer to qualitative data reduction that identifies core consistencies and meanings through identifying, coding, categorizing, and labeling the primary patterns in the data (Patton, 2002). Three patterns emerged from the data that were classified into the following categories: A

Multidisciplinary Approach, A Holistic Model, and Applied Knowledge and Perspective.

Table 18 presents descriptions and examples of each category.

Table 18

Summary Table of Categories for Added Value of Academic Training in Gerontology

Theme	Definition	Quote
Holistic Model	Gerontology viewed the “whole” person utilizing a biopsychosocial model within a holistic approach to aging.	<p>“I have a well rounded understanding of aging, including theoretical, biological, psychological, and sociological aspects, and am able to approach aging and life course development from a holistic perspective.”</p> <p>“It has been invaluable in helping me to understand the psychological and physiological changes the older person and the older body go through with time and how that affects the whole person.”</p> <p>“As a healthcare professional, I am able to meet the needs of an older patient with greater understanding of the aging process and how to address those needs from a social, psychological, biological and generational perspective.”</p> <p>“It gives people a clear understanding of the aging process, what people experience when aging, what caregivers experience, and how society deals with the aging population.”</p>

(table continues)

<p>Applied Knowledge and Perspective</p>	<p>The fundamentals necessary to become an expert in the field of aging from both an applied and theoretical perspective.</p>	<p>“Provides theoretical foundation for applied work in the field.”</p> <p>“Gerontology is a specialty and by receiving a complete background training in aging, we are better able to apply the skills and information learned to work with older persons.”</p> <p>“Provided me an opportunity to gain knowledge in an area that I have always been passionate about – but to do it in a more well-rounded way.”</p>
<p>Multidisciplinary Approach</p>	<p>Multidisciplinary approach to education about aging describes an interprofessional understanding of disciplinary boundaries, roles and responsibilities.</p>	<p>“It allows us to better understanding aging from a truly interdisciplinary light. It helps break down disciplinary boundaries to collaborate and think in a more effective way.”</p> <p>“It provided a broader lens to view multiple disciplines and society as a whole in regard to their approach to aging and the aging population.”</p> <p>‘A better understanding of the multidisciplinary approach needed to succeed in the field.’</p>

Academic training in gerontology is valued by graduates for the fundamental knowledge and applied experiences needed to become a gerontologist. The foundational knowledge, skills, and abilities gained during academic study translate into applied skills in the workforce. In addition, graduates often described the personal benefits gained through their academic study (didactic and experiential), including developing coping skills, and having appropriate knowledge to care for family members more effectively.

The Experiential Learning/Academic Model, Career Path and Professional Identity:

This analysis included responses from the following questions: How did your academic training in gerontology impact your career path, how did experiential learning impact your career path and how did experiential learning impact your professional identity. Responses to these three questions were combined based on conceptual ordering according to their properties and dimensions. The responses to the three questions fit together to provide both internal homogeneity and external heterogeneity. Emerging theory was developed as categories were reduced into concepts on the basis of open and axial coding as well as theoretical saturation (Patton, 2002). This occurred by determining those categories that recurred frequently and were most central to the developing theory. Data saturation occurred when no additional data were found with which to further develop the properties of a category. When saturation of major categories was reached, categorical generation was concluded.

Concepts and Schemes

The theoretical model was developed based on conceptualizing and classifying outcomes. The categories that emerged, along with their relationships, represent the

foundation for the developing theory. The theoretical model, development of professional identity and career path in gerontology is comprised of five concepts. Table 19 presents descriptions and examples of each concept and category related to the emergent theory. Five categories emerged from the data, including: Reinforced Choice of Career, Applied Learning, Opened Door to Job Opportunity, Provided Role Models, and Had No Impact.

Table 19

Summary of Qualitative Categories for Academic Training and Experiential Learning Influencing Career Path and Professional Identity

Theme	Definition	Quote
Reinforced Choice of Career	The experiential learning/academic model provides a mechanism of reinforcing choice of career or narrowing focus of career by exposing students to a variety of professional roles and jobs within the field of gerontology	<p>“It allowed me exposure to many facets of older adults services. It helped me to focus on my skill sets, and likes and dislikes. I was able to narrow down my scope of practice and interests in the aging field”.</p> <p>“It helped decide what direction I did not want to go within the field of aging.”</p> <p>“Going through the Master’s program at VCU confirmed for me that I want to work in the field, and inspired me with creative career ideas”.</p> <p>“It gave me a concentrated focus on specific content and the exposure led to mapping of potential roles”.</p>

(table continues)

<p>Applied Learning</p>	<p>Professional identity and career path were developed through applied learning opportunities. Applied learning provided the opportunity to try out different roles, learn from real-life situations, and gain knowledge that develops broad and specific skill sets essential to working in the field of gerontology.</p>	<p>“These experiences allowed me to see different aspects of gerontology in practice, as well as learn about organizations that provide services to elders”.</p> <p>“It grounded theory with practice”.</p> <p>“My learning experience helped (me) gain deeper roots in my professional identity”.</p> <p>“It allowed me to explore issues that strengthened my identity as a gerontologist concerned specifically with addressing the social problems with the aging population”.</p>
<p>Opened Door to Job Opportunity</p>	<p>The experiential learning/academic model of training directly provided opportunities for jobs.</p>	<p>“I completed an internship with the organization I am now CEO of, so it gave me an opportunity to showcase my talents, be hired as first a volunteer, then an employee, and work my way up to lead the organization. The experience made a huge impact on my career path”.</p> <p>“My current job was offered from the result of my practicum experience”.</p> <p>“My internship with AARP gave me hands-on experience that helped me get a job and acquire skills”.</p> <p>“Through a summer internship, I was able to learn about how a CCRC works and what types of jobs exist at CCRC’s and found an area of that setting that matched my interests. When I graduated I was fortunate enough to get such a job at the CCRC where I interned.”</p>

(table continues)

<p>Role Models</p>	<p>Career path and professional identity were influenced by working with practicing gerontological professionals. Role models and mentors model pride and ownership in being a gerontologist.</p>	<p>“Found mentors that were role models in the direction that I wanted to take.”</p> <p>“The experience provided networking links to other professionals that furthered my professional identity.”</p> <p>“It introduced me to skilled and respected professionals who appear to be clear in their own professional identities.”</p>
<p>No Impact</p>	<p>Career path and professional identity were not impacted by experiential learning.</p>	<p>“The field work I engaged in during school introduced me to policy and training, but did not provide a pathway towards career advancement. While being effective at education and introduction, there was not an actual impact in the career path despite the positive experience.”</p> <p>“It really didn’t. I worked in the aging field for many years and discovered it was not the right place for me.” (in reference to experiential learning and professional identity)</p> <p>“It did not. I was in the field before I started the Gerontology program.”</p>

Reinforced choice of career: Academic training in gerontology and experiential learning within the academic program provide an opportunity to reinforce choice of career, secure the decision to become a gerontologist, and/or narrow the scope of career choices within the gerontological field. Formal gerontological training provides an avenue for focusing specific career goals, and giving professional life direction while confirming the desire for a career in gerontology. Though academic training and experiential learning students have the ability to narrow a job focus, carve a niche within the field, and map out professional roles. For some, it also broadened the scope of practice which also served to reinforce career choice. Experiential learning provides an opportunity for clarification or verification of career choice by clarifying career path, shaping career choice, or reinforcing their choice of career. There were several expressions that demonstrated this reinforcement of choice including: verifying desire to work with seniors, securing decision to work with population, solidifying decision to stay in field of aging, and providing an impact on career direction.

“My training in gerontology has helped focus my career lens to really bring into focus who, what and how I want to practice as a Gerontologist.” “It verified for me my desire to work in direct practice with seniors and their families.” “The practicum experience allowed me to investigate area and local programs and policies... in order to make a better informed decision as to which sub-field of aging I would wish to seek employment with.”

In addition, there was a sub-set of responses that described how experiential learning provided the opportunity to experience what sub-fields were not attractive options.

“Let me experience the different types of jobs that are in the field of aging. I discovered I didn’t want to work in a residential setting.” “It helped decide what direction I did not want to go in within the field of aging.”

Experiential learning influenced professional identity by providing a venue to reinforce choice of career. The process of professional identity development was impacted by experiential learning providing a sense of affirmation of career choice. The process impacts professional identity by helping new graduates find a niche within the field, and to distinguish their role within the profession. Graduates talked about gerontology being a career not just a job.

“Now that I am in higher education as a faculty member, my experiential learning has enhanced my professional identity, as someone who had both the academic background and hands-on experience to teach and share with my students”. “I think the well rounded and variety of academic classes and service-learning helped me to recognize the skill set that I had to offer in the aging field.” “I found out what I really wanted to do. It broadened my scope of the aging field.”

Applied learning: Academic training and experiential learning provide a path towards practical application and applied understanding that impacts career path. This is particularly salient for experiential learning with the phrases hands-on learning, and practical application commonly used to describe the benefits of experiential learning. Within this category respondents talked about the benefits of “hands-on” learning and how academic learning integrated with practical and applied experiences provided solid foundational

knowledge. Graduates spoke of being exposed to “real life” situations that helped them gain understanding that they could use in their own job pursuits.

“I developed a community-based teaching curriculum for low income – this experience helped form a basic understanding of creating teaching curriculum in a “real-life” situation.” “I felt that experiential learning helped to codify academic learning into more pragmatic experiences.” “It is the means by which a student is able to integrate the academic part of their learning.”

The specific knowledge, skills and abilities gained during experiential learning impacted career path. Experience was gained by being exposed to different types of jobs in the aging field, and skills were acquired that helped those already working in the field to be more effective at their current job. Specific skill sets gained through training included; increased confidence, public speaking skills, ability to take on leadership roles, aging expertise, and content area expertise. The experience of experiential learning was a valuable tool in developing an understanding of gerontology within a practice and applied setting.

“Provided me with the knowledge and experiences that I have needed in my present position.” “It helped me gain experience in a variety of areas of gerontology to help focus my interests.” “Allowed me to gain skills needed to be an effective SNF administrator.”

Professional identity was also developed through “hands-on” applied learning opportunities. Graduates reported that experiential learning impacted their professional identity by providing an opportunity to try out different roles within gerontology. Having richer experiences in different types of positions provided a framework for clarifying

strengths and weaknesses, and understanding what aspects of job choices were good fits or bad fits. The clarification of strengths and desires through hands on learning provided an avenue to develop a sense of professional identity.

Opened door to job opportunity: Survey results indicated that seventy eight percent of graduates in this study looked for an aging-related job after completing their academic program. Career path was directly influenced by the experiential learning/academic model leading to job opportunities, often directly after graduation. Graduates expressed that formal training in gerontology makes them more competitive candidates for jobs. The degree credentials help them be perceived as more credible and result in them being a more marketable job candidate. It enabled graduates to qualify for positions that require expertise and specific qualifications.

“My current job was offered from the result of my practicum experience.” “I received a job offer after graduation from the facility in which I completed my internship.”

“My internship gave me the tools to become the administrator I am today. The personal and professional connections I made with my internship supervisor brought me to the current job I am in at the time of this survey. This job, although not a potential career, made me grow in my awareness of my professional identity. This entire journey began with one internship.”

Many graduates (48%) who did not seek employment after graduation were already working in an aging-related profession. For these graduates, the experiential learning/academic model enabled them to apply to higher level managerial positions with their own agencies, as indicated by narrative responses.

“I was already working full time in an aging-related job. I was able to add a special project to my work load to count as my practicum. This was great experiences, and also helped me advance at work and begin taking on more responsibilities.”

Role Models: Career path was impacted by the ability for students to spend time with mentors and role models during the course of their academic training. Experiential learning provides an opportunity for networking, developing professional contacts, and becoming familiar with leaders in the field.

“Allowed the opportunity to build professional contacts, and explore various positions that I would not otherwise have considered.” “Introduced me to great mentors who are solid academic, researchers, theorists, and practitioners. I’ve been honored to learn from a range of individuals who are truly experts in their passions. This is true not just for the faculty where I earned my degree in gerontology, but also the colleagues I have met through state and national gerontology organizations as well as the faculty for my doctoral program.”

Professional identity was influenced by having the opportunity to see how professional gerontologists incorporate their passion and identity, and by learning how a professional gerontologist uses their knowledge, education, and skills within an agency or organization. Professional identity is strengthened by giving pride and ownership in being a gerontologist which is modeled by those working in the aging field.

“Was able to see firsthand how individuals incorporated their passions into their work role and obtain deep satisfaction from their work.” “Having a Gerontologist as my

internship supervisor, gave me the pride and ownership of having a degree in Gerontology.” “Exposed me to more gerontologists.”

No Impact: Many graduates who described academic training and experiential learning as having no impact on career path or professional identity already had a job in the field. Others discussed dissatisfaction with the practicum/internship placement resulting in little to no impact on career path and professional identity.

“It did not impact at all, when I did it I was already working for another non-profit, and now I work for state government.” “Unfortunately my experiential learning was not a good one. It was pieced together and did not give me much direction or experience.”

Some graduates expressed challenges with finding employment with a Master’s in Gerontology.

“It (academic training) had minimal impact (on career path) as it seems to be considered a soft background and in less demand than business, public relations, public administration, social work, nursing, public health, banking, etc. which are more concrete and more sought after with greater financial rewards and advancement potential.”

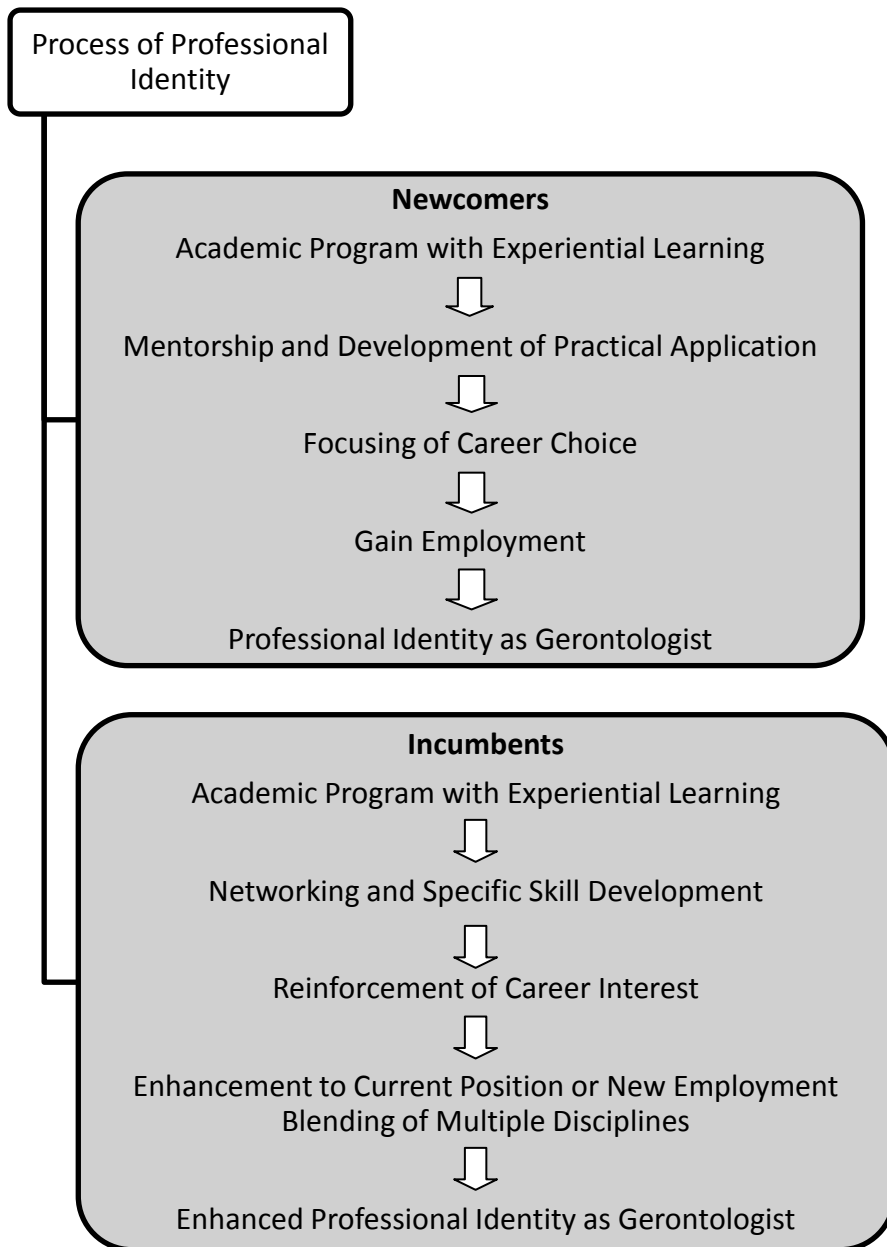
Theoretical Development

The core categories, related concepts, and quantitative findings were incorporated to develop a working model of professional identity development for emerging Gerontologists. Discovery of the model is discussed as it emerged through qualitative coding and analysis as

well as through quantitative hypothesis testing. The following theoretical propositions represent the relationships among concepts.

Figure 4 describes the theoretical model, process of professional identity by gerontology student typology.

Figure 4. Model of process of professional identity by gerontology student typology



The process of development of professional identity for Incumbents and Newcomers must be accounted for in the development of appropriate curriculum including experiential learning options to best serve these distinct student populations.

Proposition 1: The practical value and outcomes of the experiential learning component of the academic program is dependent upon the student's current career.

- a. Experiential learning impacts professional identity and career path through mentorship and practical skill development for students who are new to the field of gerontology (Newcomers).

The experiential learning/practicum experience is valuable for students who are developing a new career path in gerontology. Experiential learning positively impacts developing sense of professional identity by providing students the opportunity to integrate personal and professional values. Exposure to mentors and role models is a critical component of developing a sense of identity as an emerging Gerontologist. Newcomers seek guidance, advice and support from experienced Gerontologists. This support from professional Gerontologists is integral in learning about professional norms, values, and behaviors. The hands-on experiential learning positively impacts students by providing the practical application to gain the skills, and abilities necessary to feel a sense of competence as a Gerontologist.

In addition, experiential learning played a significant role in the development of a career path. Mentors provide guidance for students in choosing a specialty area, and finding employment in an aging-related job. The applied learning not only helped develop professional identity through career path, it also helped clarify choice of career. The

experiential learning component of the academic program provides a mechanism for “trying on” various roles within the aging field. This process is essential to developing professional identity. Professional identity is cultivated by experiencing multiple career options. Exposure to a variety of career choices enables the student to carefully choose which sub field of aging is the best fit.

- b. Experiential learning provides networking opportunities and specific skill development for career advancement for students already working in the field of aging (Incumbents).

Students entering a graduate program in gerontology, who are working in the field of aging, have different educational needs than those that are new to the field. Incumbents were more likely to report that experiential learning helped them achieve specific requirements (licensure), skills for advancement, or had no or minimal impact on their career path or professional identity. Incumbents matriculate into the program with a more developed sense of professional identity and prior applied and practical experience in the profession. This is supported quantitatively by examining the differences between clarity of professional identity for those employed in an aging-related job prior to enrollment vs. those not employed in an aging-related job prior to enrollment. The average level of professional identity for those who were employed in an aging-related job prior to entering the gerontology program, Incumbents, (4.67, SE = .17) was significantly higher than the average professional identity score for those that were not in an aging-related job, Newcomers, (4.10, SE = .14) by a two-tailed *t*-test ($t = 2.61$, $df = 138$, $p\text{-value} = .0100$). Incumbents benefit from experiential learning by developing professional contacts, and by developing specific skills that enable them to advance in their current jobs, or qualify for higher level jobs within the aging field.

Professional identity is strengthened or enhanced through the process of experiential learning.

Proposition 2: Relationships with professional Gerontologists currently working in the field of aging represent an essential component in the development of professional identity for all emerging Gerontologists.

The relationships developed with mentors, role models, faculty, site supervisors, preceptors and instructors are valuable to the professional identity of both Newcomers and Incumbents in gerontology. Professional identity was developed and enhanced by exposure to professionals with both knowledge and enthusiasm for working with older adults. These relationships provided an opportunity to develop a sense of ownership and pride in being a Gerontologist. For Newcomers, the role model/mentor relationship provided an avenue to identify strengths, skills and provided focus of career choices and interests. For Incumbents, networking with professionals currently working in the field was valuable to enhancing an already existing sense of professional identity and creating new job opportunities. This proposition is supported by regression analysis results supporting hypothesis 4. Service-learning items; develop a network of professional contacts and apply my skills and knowledge to new situations were significant predictors of professional identity development R^2 of .32 ($F(2,37) = 8.5, p = .0009$).

Proposition 3: Experiential learning is an important contributor to professional identity for both traditional and nontraditional gerontology students.

Age, in itself, shows a modest but significant correlation with professional identity ($r = .17, p = .0310$). Demonstrated another way, the average level of professional identity for

older, nontraditional students (4.55, SD = 1.27) is significantly higher than for younger, traditional students (3.99, SD = 1.27) by a two-tailed *t*-test ($t = -2.51, df = 133, p = .0133$). However, in this sample of gerontology graduates there is no statistically significant difference between the average age of Incumbents (36.5, SD = 11.97), and the average age of Newcomers (33.10, SD = 10.39) by a two-tailed *t*-test ($t = 1.82, df = 139, p = .0706$). Incumbents ranged in age from 22 to 63, while Newcomers ranged in age from 21 to 57. Therefore, the benefits of experiential learning, as described above, for Incumbents and Newcomers apply to students of all ages within both student typologies.

Proposition 4: Student typology is a better predictor of professional identity than career history for gerontology students.

There is no significant difference in level of professional identity for students who perceive gerontology as a first career (4.48, SD = 1.30) and students who perceive enrollment in a gerontology program as a change in career (4.10, 1.27) by a two tailed *t*-test ($t = -1.72, df = 136, p = .0877$). It is important to note, however, that students, who report that enrollment in a gerontology program does not constitute a change in career, have a higher level of professional identity (4.48) compared to those who report enrollment in gerontology as a change in career (4.10). This is also demonstrated by regression analysis results testing hypothesis 2. Interestingly, in terms of student typology, enrollment in a gerontology program represents a first career for 69% of Incumbents, as well as 44% of Newcomers (Table 20). Despite the fact that 56% of Newcomers are embarking on a second career, Incumbents in a first career, have a higher level of professional identity. Therefore, student typology is a more accurate predictor of level of professional identity than perceived change in career.

Table 20

Summary of Newcomers and Incumbents by Age and Career History (N=146)

Characteristic	<u>n</u>	%
Newcomers		
Age at time of enrollment		
21-29 (traditional)	40	51
30-63 (nontraditional)	42	49
Change in Career		
Yes	47	56
No	37	44
Incumbents		
Age at time of enrollment		
21-29 (traditional)	22	37
30-63 (nontraditional)	37	63
Change in Career		
Yes	18	31
No	41	69

Discussion

There is ample literature on the professional identity development of nurses, teachers, and social workers, among other professions. However, until this point, little has been available on the professional identity development of Gerontologist, particularly in the form of a theoretical model that approaches the development of identity through educational pedagogy. This research is the first to focus on factors influencing the professional identity of Gerontologists. The aging of the population is raising awareness of the critical need for professionally trained and skilled workers to provide care for all older adults. This study allowed an examination of the variables that impact academic training, career path, and ultimately the professional identity of Gerontologists. This study is unique in that it uses a mixed method approach to analysis and a grounded theory approach to theoretical model development. In this section, the results from the present study are discussed, including the

application of the theoretical model of educational pedagogy based on student typology, followed by limitations and future directions for research.

Academic training in gerontology comprised of the didactic presentation of scholarly content, in addition to applied practical skill development, added value to the overall academic experience for students. An academic/experiential learning model provided the necessary structure and format to develop and practice critical skills for students training as Gerontologists. The academic content introduced students to a holistic approach to aging that viewed aging from a biopsychosocial perspective. This didactic training and education provided the necessary foundational knowledge for students to master the theories and concepts of aging. This holistic biopsychosocial approach also prepared students to provide direct person-centered care for a diverse aging population.

As evidenced through anecdotal responses, academic programs incorporating opportunity for applied knowledge and perspective was valued by emerging Gerontologists. Applied skills were acquired through a combination of academic training and experiential learning that exposed the students to core content in addition to practical application. In addition, students valued gerontological education emphasizing interprofessional education. Academic training approaching education from a multidisciplinary perspective provided interprofessional understanding of roles and responsibilities that Gerontologists encounter in their professional roles. Aging-related jobs are comprised of a multitude of professionals, as well as para-professionals, representing a variety of disciplines including; nursing, pharmacy, social work, and medicine. The emerging Gerontologist benefitted from a solid understanding of the multidisciplinary approach needed to navigate and succeed in the field of aging.

Study results point to the important role that an academic/experiential learning pedagogy plays in the process of developing professional identity and career path. The analysis of the data suggests that experiential learning, that exposes students to mentors and role models, plays a key role in narrowing career choice and learning to identify with the profession of gerontology. Experiential learning opportunities provided a framework for all gerontology students to gain and apply the skills and knowledge necessary for professional identity development in the field of aging. However, study results support an important distinction between two subsets of students that enrolled in graduate gerontology programs. Incumbents are students who have formal experience working in an aging-related job prior to enrollment in a gerontology program. Newcomers are students who are new to the field of gerontology regardless of career history. Findings indicated that experiential learning and mentorship represent important, but different, outcomes for Incumbents vs. Newcomers. For Newcomers, experiential learning and mentorship provided opportunities that led to employment in professional aging-related jobs and a path to develop a sense of professional identity. For Incumbents, experiential learning and networking opportunities provided an avenue for advancement of job responsibilities and enhancement to an already developed sense of professional identity as a Gerontologist. However, Incumbents were more likely to report that their experiential learning experience had no impact on their career path or professional identity. Therefore, in order to address the development of career and professional identity for Incumbents, it is important to explore types of experiential learning opportunities that best fit the needs of this group of students to improve their educational experience. Overall, these findings are consistent with Adams and Hean's (2006) research which found that professional identity is highest among those with previous work experience.

These findings provide support to Adams and Hean's (2006) research indicating that those who have a greater knowledge of their own profession have a more developed sense of professional identity.

Students in both the Newcomer and Incumbent groups represent all ages and stages of the lifespan. In fact, almost half (44%) of this sample represented non-traditional students 30 years of age and older. These findings support Super (1988) and Vonderack's (1998) theories of a life-span approach to career development. According to Super (1988) personal growth and change throughout the life span impact vocational choices and career trajectory. This is demonstrated by the diverse age and career history represented in this study. In terms of development of a professional identity as a Gerontologist, employment in an aging-related job, or student typology, is more predictive of a developed sense of professional identity than both age and career stage. Therefore, the academic/experiential learning model for graduate programs in gerontology must be developed and refined based on the needs of these two distinct groups of students. Academic programs would be remiss in proposing a one-size fits all approach to gerontological education, which does not account for the trajectory of career and professional identity for a heterogeneous student pool.

Exposure to role models through mentoring and networking with professionals in the aging field represented essential components of the experiential learning experience for all gerontology students. This supports Dobrow and Higgins (2005) findings that professional identity can be influenced by the opportunity to network with professionals who represent a variety of disciplines. In this study, professional identity was developed and enhanced by exposure to professionals with both knowledge and enthusiasm for working with older adults. These relationships provided an opportunity to develop a sense of ownership and

pride in being a Gerontologist. Further support for Dobrow and Higgins (2006) findings are illustrated by the significant relationship between clarity of professional identity and service-learning courses enabling students to develop a network of professional contacts and mentors. In addition, the experiential learning component of the academic program provided a mechanism for students to discover what types of roles and jobs within gerontology were suitable fits for their interests and personalities. In sum, study results support that experiential learning is a critical element to a quality educational experience for Gerontologists.

Limitations: Application of the theoretical model of professional identity based on student typology should be considered in view of a number of methodological limitations. Among these are the size and selection of the samples. Sample size may have been an issue affecting the sensitivity of finding a significant effect in the quantitative analyses for students who took service-learning courses. Although service-learning represented an important construct in this study, the sample of graduates who participated in service-learning coursework was small. Additional studies should be undertaken with larger samples of students experienced in service-learning methodology.

Regarding selection, participants were chosen based on a convenience sample of alumni on distribution email lists from gerontology departments within their Universities. This creates a potential sample selection bias due to the non-random nature of participant recruitment. In addition, alumni in contact with their University's may be more satisfied with their educational experience, more involved with their University or department and/ or more connected professionally and personally to their field of study. This bias may impact the external validity of the study results.

Finally, the role of gender and race/ethnicity also represent limitations to this study design. Information on participant gender was not collected in this sample and there was little diversity in terms of race and ethnicity. These issues must be considered in the application of the theoretical model.

Implications and Future Directions: This study has raised questions that are worthy of further consideration. First, although race and ethnicity data was collected, an in-depth exploration of ethnic differences between participants represents an opportunity for future research on the professional identity development of Gerontologists. Particularly, study results demonstrated a significant difference in professional identity scores for Caucasians and African Americans. Miehl (2001) found that racial identity development can influence overall professional identity development. Therefore, the process by which professional identity forms, and continues to develop for ethnically diverse gerontology students, is of interest.

There is also an opportunity to undertake further research to explore the development of professional identity over the duration of the academic program. Since the current study was retrospective and captured views of professional identity after completion of the educational program, additional studies should explore changes in professional identity during the course of study in gerontology. Specifically, further research should explore the development of professional identity during experiential learning, through practicum, internships and field work, during the course of academic study.

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Appendix 1

List of Constructs

Construct	Items
AGHE Exit Survey	<p style="text-align: center;">Demographics</p> <ol style="list-style-type: none"> 1. Degree(s) earned 2. What was your age when you first enrolled in the gerontology program? 3. When you enrolled in the program, did you perceive this as a change in your career? 4. What were you doing before your enrollment in the Gerontology program? <ul style="list-style-type: none"> ○ Undergraduate ○ Stay at home parent ○ Family Caregiving ○ Non-professional job ○ Previous Career 5. Please indicate whether or not you are currently employed full-time or part-time or not employed? (FT/PT/NE,Retired, Student) 6. Please check the ONE category that best describes your current discipline <ul style="list-style-type: none"> ○ Administrative/Office manager ○ Advocacy/Policy planning ○ Assisted living administrator ○ Clinical/Counseling psychology ○ Educator/Trainer ○ Faculty – University/College ○ Financial services ○ Geriatric care manager ○ Gerontologist ○ Health administrator ○ Hospital administrator ○ Human Resources ○ Marketing ○ Non-profit administration ○ Nursing ○ Nursing home/SNF administrator ○ Occupational therapist ○ Pharmacist ○ Physical therapist ○ Real Estate ○ Research ○ Small business owner

- Social services
 - Social worker
 - Therapeutic recreation
 - Other _____
7. How many years have you worked in this occupation?
 8. Did your Gerontology/Aging training degree help you obtain a job?
 9. Were you employed in an aging-related job prior to entering your gerontology program? (Y/N)
 - a. If yes, are you still employed with that agency/organization?
 10. How many years were you employed working with older adults prior to entering the gerontology program?
 11. Did you look for an aging related job after you completed your gerontology program? (Y/N)
 - a. If no, indicate primary reasons why (please select all that apply)
 - Lack of job opportunity in the field of aging
 - Salary opportunities too low
 - Poor working conditions
 - Frustration with bureaucratic red tape
 - Can use skills/knowledge more effectively in another area
 - Poor opportunity for advancement
 - Available jobs would require moving too far away
 - Pursuing another career
 - Retired
 - Family responsibilities
 - Personal choice (please specify)
 - Developed interest in other areas of employment
 - Other
 12. Have you been employed in a professional position working with older adults since receiving your gerontology credential? (Y/N)
 13. Is it your intention to remain in the field of aging? (Y/N/Unsure/Retired)
 14. If you are not currently employed in the field of aging, is it your intention to seek employment in aging? (Y/N)
 15. What are the primary reasons why you are not seeking employment in aging? (please select all that apply)
 - Lack of job opportunity in the field of aging
 - Salary opportunities too low
 - Poor working conditions
 - Frustration with bureaucratic red tape
 - Can use skills/knowledge more effectively in another area

	<ul style="list-style-type: none"> - Poor opportunity for advancement - Available jobs would require moving too far away - Pursuing another career - Retired - Family responsibilities - Personal choice (please specify) - Developed interest in other areas of employment - Other <p>16. Please rate your overall level of satisfaction with your current profession (0-4 satisfaction scale)</p> <p>17. Please rate your level of satisfaction with the following: (0-4 satisfaction scale)</p> <ul style="list-style-type: none"> a. Overall satisfaction with job b. Salary c. Number of weekly hours worked d. Job responsibilities e. Relationship with supervisor f. Relationship with co-workers g. Opportunity for advancement h. Relationship with clients/residents/patients
Career Measure	<ol style="list-style-type: none"> 1. When you enrolled in the program, did you perceive this as a change in your career? 2. What were you doing before your enrollment in the Gerontology program? <ul style="list-style-type: none"> - Previous career (please describe) - Undergraduate - Stay at home parent - Family caregiving - Non-professional job
Clarity of Professional Identity	<ol style="list-style-type: none"> 1. I have developed a clear career and professional identity. 2. I am still searching for my career and professional identity (reverse coded) 3. I know who I am, professionally and in my career. 4. I do not yet know what my career and professional identity is (reverse coded). <p>Please choose the best response below</p> <ul style="list-style-type: none"> a. Being an aging specialist is at the core of my professional identity b. Being an aging specialist in an add-on to my professional identity c. Being an aging specialist in not a part of my professional identity
Service-Learning Questions	<ol style="list-style-type: none"> 1. Did you participate in any Service-learning classes in the Gerontology program? (Y/N) 2. If yes, how many Service-learning classes did you take?

	<p>(1-5)</p> <p>3. Service-learning course(s) enabled me to: (0 -4 agreement scale)</p> <ul style="list-style-type: none"> a. Apply my skills and knowledge to new situations b. Recognize how theories and conceptual models can be applied in real-world situations. c. Develop a network of professional contacts and/or mentors d. Understand how people within the profession think and behave e. Better understand my own strengths and weaknesses
Qualitative Questions	<ul style="list-style-type: none"> 1. In your experience, what is the added value of academic training in gerontology? 2. How did your academic training in gerontology impact your career path? (Experiential learning defined as hands-on learning experiences that includes: service-learning classes, practicum, field work, clerkships, internships and apprenticeships). 3. Did you participate in experiential learning (i.e., practicum, field work, clerkship, internship and/or apprenticeship)? 4. How did experiential learning impact your career path? 5. How did experiential learning impact your professional identity?
Demographics	<ul style="list-style-type: none"> 1. In what year were you born? 2. Please specify your race/ethnicity <ul style="list-style-type: none"> a. White/Caucasian b. American Indian or Alaska native c. Asian d. Black or African American e. Latino/Hispanic f. Native Hawaiian or Pacific Islander g. Other

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2 LICENSURE – n/a

3 EDUCATION

2009-present Ph.D student, Virginia Commonwealth
University – Developmental Psychology
1995 M.S. Virginia Commonwealth University – Gerontology
1992 B.A. University of Central Florida – Psychology/Gerontology

4 POSTDOCTORAL TRAINING OR SPECIAL EXPERIENCE

5 MILITARY SERVICE: None

6 ACADEMIC APPOINTMENTS OR OTHER SIGNIFICANT WORK EXPERIENCE

2010-present Assistant Professor, Department of Gerontology, School of Allied Health Professions, Virginia Commonwealth University
2008-2010 Instructor and Clinical Coordinator, Department of Gerontology, School of Allied Health Professions, Virginia Commonwealth University
2007-2008 Continuing Educator Coordinator, Department of Gerontology, School of Allied Health Professions, Virginia Commonwealth University

- 2001-2004 Research Specialist, Virginia Geriatric Education Center, Department of Gerontology, School of Allied Health Professions, Virginia Commonwealth University
- 1998-2000 Senior Center Director, Selfhelp Community Services, New York, New York
- 1995-1998 Research Project Coordinator, Hebrew Home for the Aged, Riverdale, New York
- 1994-1995 Director of Adult and Senior Adult Services, Jewish Community Center of Richmond, Richmond, Virginia

7 MEMBERSHIPS IN SCIENTIFIC, HONORARY AND PROFESSIONAL SOCIETIES

- Gerontological Society of America
- Southern Gerontological Society
- Association for Gerontology in Higher Education

8 MEMBERSHIPS IN COMMUNITY ORGANIZATIONS

- Richmond Senior Network
- Parent Teacher Association (Wellness Chair 2007-2009)
- Communities of Winterpock Association (Vice President 2008-present)
- Boy Scouts of America (Committee member 2008-present)

9 SPECIAL AWARDS, FELLOWSHIPS, AND OTHER HONORS

- 2011 Community Exemplary Outreach Award, Office of Community Engagement, Virginia Commonwealth University
- 2011 Invited Peer Reviewer, 2011 Aging in America conference abstracts
- 2011 Invited Peer Reviewer, 2011 Association for Gerontology in Higher Education conference abstracts
- 2010 Invited Grant Reviewer, 2010, Geriatric Training and Education Grants
- 2009 Service Learning Associates Program Participant, Office of Community Programs, Virginia Commonwealth University

10 MAJOR COMMITTEES

10.0 Department

- Department of Gerontology Recruitment Committee
- Department of Gerontology Continuing Education Committee

- Department of Gerontology Admissions Committee
- Department of Gerontology Advisory Board Committee
- Department of Gerontology Curriculum Review Committee

10.1 **School**

- Diversity Task Force Committee for the School of Allied Health
- Professionalism Committee for the School of Allied Health
- Clinical Coordinator Committee for the School of Allied Health

10.2 **University**

- Equity and Diversity Committee (2011-2013)

10.3 **State/Local**

- MemoryCommons Program Development Committee, University of Virginia (2010)
- A Community Partnership, Senior Center of Richmond Planning Committee (2006)
- Selfhelp Community Services Agency wide Initiatives Development Committee (1999-2000)
- Jewish Community Center of Richmond Adult and Senior Adult Services Committee Chair (1994-1995)

10.4 **Regional**

- AGHE local arrangements committee... 2011-2012
- AGHE Program Co-Chair for the Association for Gerontology in Higher Education Annual Conference 2011 (2010-2011)
- National Partnership for Action, Office of Minority Health, Community Partner, (2010)
- Academic Program Development Committee for the Association for Gerontology in Higher Education (2008-present)
- Faculty Development Committee for the Association for Gerontology in Higher Education (2010-present)

11 OTHER SIGNIFICANT SCHOLARLY, RESEARCH, OR ADMINISTRATIVE EXPERIENCE

11.1a. **Grants Received**

Principal Investigator: Dental Fair for Virginia's Native American Tribes
Virginia Commonwealth University, \$18,000
Funding Period July 2011-June 2012

Investigator (PI: Welleford and Stanculescu): Webinar Training on Dementia and
Alzheimer's Disease for the Virginia Professional Caregiver
Geriatric Training and Education, \$ 9,850
Funding Period January 2011 – June 2011

Gerontological Society of America
Careers in Aging Grant Award, \$200
Funding Year – 2011

Principal Investigator: Cultural Competency and Sensitivity Training for
Healthcare Professionals Providing Service to the Lesbian, Gay, Bisexual and
Transgender Aging Population
Virginia Center on Aging, \$23,690
Funding Period October 2010 – June 2011

Principal Investigator: Caregiver Support Program Collaboration
Council for Community Engagement
Virginia Commonwealth University, \$18,000
Funding Period July 2009- June 2010

Service Learning Associates Program
Virginia Commonwealth University
Division of Community Engagement, \$500
Funding Year – Spring 2009

Principal Investigator: Health Disparities Service-Learning Collaborative
Virginia Commonwealth University, \$3,000
Funding Period – 2009

Development of Computer Learning Center for Seniors
Councilman's Office, Forest Hills, New York
\$10,000
Funding year - 1999

11.1b **Grant applied for but not received**

Principal Investigator: Services for SAGE, \$10,000, Richmond Giving Circle. Not
funded. Funding cycle, 2011

Metlife Caregiver Award. Caregiver Telephone Support Pilot Program, \$20,000.
Funding cycle, 2010

Principal Investigator: Autism and Aging: Development of a Training Protocol, Autism Speak Community Grant, \$25,000. Not funded. Funding cycle, 2010

Principal Investigator: Caregiver Telephone Support Training Caregiver A Best Practice Approach, Geriatric Training and Education Grant. \$15,000. Not funded. Funding cycle, 2009-2010.

Principal Investigator: Autism and Aging: Development of a Training Protocol, Council for Community Engagement Grant, \$14,000. Not funded. Funding cycle, 2009 - 2010.

12 BIBLIOGRAPHY

12.1 Papers published

Chung, H., Teresi, J., Guarnaccia, J., Meyers, B.S., , Holmes, D., Bobrowitz (Gendron), T., Eimicke, J.P. and Ferran, E.(2003) Depressive Symptoms and Psychiatric Distress in Low Income Asian and Latino Primary Care Patients: Prevalence and Recognition. *Community Mental Health Journal*, 39(1): 33-46.

Mezey, M., Teresi, J., Ramsey, G., Mitty, E., and Bobrowitz (Gendron), T. (2000). Decision-making capacity to execute a health care proxy: development and testing of guidelines. *Journal of American Geriatrics Society*, 48 (2):179-87.

12.2 Professional Presentations

Marling, S., White, J., & Gendron. Community Program Development for the GLBT Older Adult Population. American Society on Aging Conference, San Francisco, CA, April 2011.

White, J., Gendron, T. & Marling, S. Sustainable Partnerships within Community-Based Cultural Competency Program Development. Southern Gerontological Society, Raleigh, NC, March 2011

Duffy R. , Gendron T. The Benefits of Chi Kung for Older Adults. Southern Gerontological Society, Raleigh, NC. March 2011

McMullen, T.L., Brown, C., Gendron, T., Waters., L., Manning, L.K., Davarian, S., Krok, J. On Becoming a Gerontologist: Student Perspectives on the Field of Gerontology (Part 1 or 2). Association for Gerontology in Higher Education Conference, Cincinnati, OH. March 2011

Teaster, P., Gendron, T., Welleford, A.E., and Curch, L. Surviving and Thriving as a Female Gerontologist in an Academic Setting. Association for Gerontology in Higher Education Conference, Cincinnati, OH. March 2011

Gendron, T. Ethnic Disparities in Dementia Care. American Society on Aging/National Council on Aging Conference. Chicago, IL. March 2010

Bumbalo, H., Gendron, T. & Welleford, A. Gerontologist, Inc. A Brand Worthy of Remark. Southern Gerontological Society of America, Richmond, VA, April 2010.

Flora, D., Slattum, P., Gendron, T., & Welleford, A. Gerontology and Pharmacy Collaboration: A Description of the Combined Degree Program at Virginia Commonwealth University, Southern Gerontological Society of America, Richmond, VA, April 2010.

Gendron, T. Decision-making capacity to execute a health care proxy: development and testing of guidelines. Conference for Aging Care Professional Workers, New York. New York, NY, 1999

12.3 **Invited Presentations**

Agesim and Gerontophobia, December 15, 2009

Didactic Presentation for Doctoral Psychology Interns

Aging in America, November, 2009

Lecture at Virginia Commonwealth University

Resiliency and Coping in Older Adults, September 21, 2010

Fairfax County Department of Family Service, Adult Division Annual Training

Ageism and Gerontophobia, October 12, 2010

Didactic Presentation for Doctoral Psychology Interns

Ethnic Disparities in Dementia Diagnosis and Treatment, November 4,

2010, 9th Annual Alzheimer's Education Conference: Best Practices in Dementia Care

Aging in America, December, 2010

Lecture at Virginia Commonwealth University

Cultural Competence in Dementia Care, June 28, 2011

Webinar presentation